Foster Care Maintenance Payments Policies and Procedures Manual

Service Chapter 623-05

North Dakota Department of Human Services 600 East Boulevard Dept. 325 Bismarck, ND 58505-0250

Service 623 Chapter 05

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All concepts of this chapter apply to Title IV-E (Title IV-E of the Social Security Act), regular, and emergency assistance foster care payments.

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Introduction 623-05-01 (Revised 8/15/06 ML #3025)

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An eligibility determination must be completed for <u>all</u> children in Foster Care to determine if they are entitled to state or federal benefits. Each of the criteria that must be considered when making this determination is discussed below. Most of these criteria apply to all children. However, the criteria related to the Title IV-E eligibility is based on the AFDC requirements as of July 16, 1996.

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Eligibility General Statement 623-05-01-05 (Revised 8/15/06 ML #3025)

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The Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) added a new Part E to Title IV of the Social Security Act, which established a program of adoption assistance for eligible children and strengthened the program of foster care assistance for needy and dependent children.

Federal Funds can be claimed for any child who meets certain Title IV-E eligibility requirements. Economic Assistance staff determines eligibility for this program. However, the Social Worker/Case Manager (from county, DJS, tribe) is responsible for assisting in obtaining the information needed to determine eligibility. Detailed policy, reflecting the eligibility criteria a child must meet before eligibility can be established and Title IV-E funds claimed, is found in a separate manual prepared for the Economic Assistance staff (Service Chapter 447-10).

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Definitions 623-05-05

Licensing Requirements 623-05-05 (Revised 8/15/06 ML #3025)

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No person may furnish Foster Care for children for more than thirty days during a calendar year without first procuring a license to do so from the Department. The mandatory provisions of this section requiring licensure do apply when the care is provided in:

- 1. The home of a person related to the child by blood or marriage.
- 2. A home or institution under the management and control of the state or a political subdivision.
- 3. A home or facility furnishing room and board primarily to accommodate the child's educational or vocational needs.

Source: NDCC 50-11-01.

Although the above three situations do not require licensing to be within state law, they <u>must</u> be licensed if foster care payments are made to them.

License status must be current on CCWIPS for a provider payment to be issued.

"The Adoption & Safe Families Act of 1997" (ASFA) made paramount the health, safety, and well being of children. Licensing is one of the safeguards used to protect children in foster care. The ASFA Federal Regulations effective March 27, 2000 prohibit provisional licensure of foster parents. Secondly, documentation must be provided that criminal records checks have been conducted with respect to prospective foster and adoptive parents.

The background check consists of the following:

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- 1. Completion of "Personal Authorization for Criminal Record Inquiry," SFN 838, for each adult in the prospective foster home.
- 2. Completion of "Background Check Address Disclosure," SFN 377, for each Adult in the prospective foster home.
- 3. Completion of two fingerprinting cards, if required.

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Relative's Right to Request That Home be Licensed 623-05-07

(Revised 1/26/07 ML #3051)

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In some instances, foster care payment is somewhat larger than a regular TANF payment, the latter which is a set standard when a dependent child lives with an ineligible, non-legally responsible relative (see Service Chapter 400-10). Such relative may request to have his or her home licensed or approved in order to receive the higher foster care rate. If the home meets the standards for licensure or approval and if the child(ren) in question otherwise meets all requirements of foster care, the appropriate foster care rate must be paid.

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Affidavit of Compliance with Licensing Requirements 623-05-05-10

(Revised 8/15/06 ML #3025)

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Affidavit of compliance with licensing requirements is a statement in writing by a representative of an Indian tribe or an Indian agency stating that a specific home on an Indian reservation meets federal and state requirements pertaining to foster homes, which statement is subscribed and sworn to before the superintendent of an Indian agency, the tribal chairperson, or other authorized person.

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Tribal Government Can License Their Own Facilities 623-05-05

(Revised 8/15/06 ML #3025)

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Any tribal government may choose to license their own facilities on the reservation. If a tribe should choose this method, they may either develop their own standards or follow the standards as outlined by the North Dakota Department of Human Services. Standards must be reasonably in accord with a recognized national standard in order for foster care payment to be made.

Once they have completed their foster home study and criminal background checks, they would then submit a copy of their affidavit to the North Dakota Department of Human Services to indicate that they are an approved facility.

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Applicant 623-05-05-20 (Revised 8/15/06 ML #3025)

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- 1. Applicant shall mean a parent(s), person or agency having the custody of a dependent child making application for aid for such child under the provisions of Chapter 447-10.
- 2. A foster child that reaches the age of 18 years may make an application in his or her own behalf.

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Foster Care Maintenance Payment 623-05-05-25 (Revised 11/21/08 ML #3168)

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Foster care maintenance payment is a program for the payment of foster care supported by federal, state, and county funds for dependent children who are living in licensed foster family homes, foster care group homes, residential child care facilities, or residential treatment facilities (only those eligible to receive foster care payment). Foster care maintenance means payments to cover the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to a child, and reasonable travel to the child's home for visitation and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. In residential care, reasonable costs of administration are included. (In addition to maintenance payments, certain administrative and service payments are also allowable.) Hereafter in this chapter when the shorter terms "foster care payment" or "maintenance payments" are used, it means the foster care maintenance payment program.

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Family Foster Home 623-05-05-30 (Revised 11/1/10 ML #3250)

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Family foster home means an occupied private residence in which foster care for children is regularly provided by the owner or lessee thereof to no more than four children. Exception: unless <u>all</u> the children in foster care are related to each other by blood or marriage, or unless the department approves otherwise for the placement of siblings, in which case the limitation shall not apply.

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Group Home 623-05-05-35 (Revised 8/15/06 ML #3025)

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Group home means a residence in which foster care is regularly provided for more than four, but less than ten, unrelated children.

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Residential Child Care Facility 623-05-05-40 (Revised 8/15/06 ML #3025)

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Residential child care facility means a facility other than an occupied private residence providing foster care to more than eight unrelated children, except as may be otherwise provided by rule or regulation.

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Residential Treatment Center for Children 623-05-05-45 (Revised 1/26/07 ML #3051)

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Residential treatment center for children means a licensed facility that provides residential treatment for mentally ill persons who are children within the meaning of NDCC section <u>27-20-02</u> or who are minors.

Effective July 1, 2006, residential treatment facilities in-state and some out-of-state, that are accredited and providing inpatient psychiatric services will be referred to as Psychiatric Residential Treatment Facilities (PRTF's).

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Psychiatric Residential Treatment Centers (PRTF's) 623-05-05

(Revised 8/15/06 ML #3025)

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PRTF's are accredited residential treatment centers that provide inpatient psychiatric services for eligible individuals under age 21. Foster youth placed in PRTF's will be processed under regular Medicaid rules. In order for Medicaid to pay for the individual's care, a certificate of need will be required.

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Tribal Government Payments 623-05-05-55 (Revised 8/15/06 ML #3025)

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Foster care payment to facilities licensed by the tribe can only be made if the facility meets Department of Human Services standards or equivalent and such standards have prior approval of Department of Human Services.

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Foster Care 623-05-05-60 (Revised 1/26/07 ML #3051)

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Hereafter in this chapter, the general term foster care may include care in foster family homes, group homes, residential child care facilities, residential treatment centers, and psychiatric residential treatment facilities.

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Custodian or Custodial Agency 623-05-65 (Revised 8/15/06 ML #3025)

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The custodian is the agency to which the court has given responsibility for care, custody and control, or for placement and care of the child. This may be a county social service board, the Division of Juvenile Services, tribal social services, or the Executive Director of the North Dakota Department of Human Services.

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Authority References 623-05-10 (Revised 8/15/06 ML #3025)

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- 1. Chapter <u>50-11</u> of the North Dakota Century Code (Foster Care Homes for Children and Adults)
- 2. Chapter <u>50-09</u> of the North Dakota Century Code (Aid to Dependent Children)
- 3. Chapter <u>27-20</u> of the North Dakota Century Code (Uniform Juvenile Court Act)
- 4. Chapter <u>50-06-15</u> of the North Dakota Century Code (The Department of Human Services Confidentiality)
- 5. Title IV-E of the Social Security Act
- 6. Title IV-B of the Social Security Act
- 7. Title XIX of the Social Security Act

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General Information 623-05-15

Purpose of Payment 623-05-15-05 (Revised 8/15/06 ML #3025)

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The purpose of foster care maintenance payment is to reimburse a foster parent or other licensed child care facility for care, protection, and other material necessities provided for an eligible foster child by agreement between the county social service board having financial responsibility for foster care payment and the licensed provider.

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Specialized Family Foster Care Payment (EMP) 623-05-15-10

(Revised 8/15/06 ML #3025)

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This is an excess maintenance payment (EMP) for 24 hour care and supervision of a foster child with special problems, the severity which places undue demands on the foster parents physical, emotional, and/or material resources in excess of the demands expected in normal foster parenting.

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Confidentiality 623-05-15-15 (Revised 8/15/06 ML #3025)

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Information related to foster care and subsidized adoption is confidential. Refer to NDCC $\underline{50-06-15}$ of the North Dakota Century Code, and to NDDHS Manual Chapter 110-01 for further information.

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Application 623-05-15-20 (Revised 4/12/13 ML #3369)

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When financial assistance is needed to provide foster care payments, the parent(s), person or agency legally responsible for the financial support of the foster child or children needing foster care make application on <u>SFN 641</u>, Title IV-E/Title XIX Application Foster Care. In the case of Title IV-E children under the custody of tribal social services, this refers to a foster care paid placement. Every attempt should be made to provide the Administrative County with a timely application.

Documentation needed to determine Title IV-E eligibility and reimbursability must be received by the Administrative County with 45 days of receiving the application for foster care. If the information is not received within 45 days, the application will be considered incomplete and closed.

Retroactive payments in excess of 90 days are not allowed. For the purposes of initial payment, foster care expenses in excess of 90 days from when all documents are received by the Administrative County to determine eligibility would not be eligible for reimbursement.

An unwed mother, regardless of age, is legally responsible for the support of her child or unborn child and this responsibility is shared by the father if paternity has been established.

All children in the same family may be included in one application even though they represent individual cases and may receive care in different foster homes.

When the juvenile court has given custody of a child to one of the following:

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- 1. The Executive Director of the North Dakota Department of Human Services;
- 2. The county director;
- 3. A licensed child placing agency; or
- 4. State Division of Juvenile Services.

Regardless of where the application for assistance may be initiated, the county having financial responsibility is also responsible for final action on the application. The financial county may negotiate an agreement with another county to provide certain services.

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Case Numbering 623-05-15-25 (Revised 11/1/10 ML #3250)

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The major computer systems in the Department of Human Services (DHS) share a common demographic file. CCWIPS and FRAME are two of these systems. One of the data fields in this file is the case number. The case number is unique to each person. The case number is a sequential number automatically assigned in FRAME and CCWIPS during the registration process.

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Financial Responsibility for Foster Care Payment 623-05-15-30

(Revised 1/26/07 ML #3051)

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The county of financial responsibility may arrange with another county to perform certain activities such as provision of on-going services, and payment management. This will always be done through a written agreement, "Placement Agreement Between Counties," which is negotiated between the involved counties and pertains to financial or service activities. This is a county form used whenever a child is placed by the financial county into family foster care in a different county. It is not used in therapeutic family foster care or group/RCCF/RTC/PRTF care.

The "county having financial responsibility" means the county where the child's parent has or had residence at the time of court intervention. The county of financial responsibility could change after a 60-day lapse in placement. If the parents do not have residence in North Dakota, then the financial responsibility exists in the county where the child resided at the time of court intervention.

(Definition developed by County Directors, 1997).

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Responsibilities of County of Financial Responsibility 623-05-15-30-05

(Revised 10/1/08 ML #3158)

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Financial responsibility for the case always rests with the "financial county."

The financial county generates the Foster Care Payment information on the appropriate CCWIPS screen unless an agreement to do so is negotiated with another county. If an agreement exists with another county, refer to CCWIPS Manual.

The county of financial responsibility maintains all case management responsibility not vested in the custodian. In cases where the financially responsible county is also the custodian, the county has complete responsibility for the case, including eligibility and payment and all activities associated with placement and supervision of the child.

In certain circumstances, the financial/custodial county may negotiate an agreement with another county to provide specific services, such as placement and supervision. In such an instance, the financial/custodial county remains responsible for ensuring that permanency planning takes place, and that the case is documented, for example, in preparation for audit.

Therapeutic Family Foster Home, Group/RCCF/RTC/PRTF Facility:

1. Therapeutic Family Foster Home:

In therapeutic family foster care, the financial county for purposes of therapeutic family foster home cases is similar to the procedure for children in group/RCCF/RTC/PRTF care. The custodian refers the child, ensures that permanency planning takes place, maintains the county case file for purposes of ensuring that custodial duties are carried out and compliance issues met. Therefore, for purposes of therapeutic family foster care, the county of financial responsibility

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for eligibility and payment in most cases is the custodial county. In special circumstances there may be exceptions to this. Please refer questions to the regional human service supervisor.

2. Group/Residential Child Care Facility

The county of financial responsibility for children and youth in foster care in group and/or residential child care facilities, in or out of state, is the county where the child's parent has residence at the time of court intervention. Financial responsibility will remain with that county as long as the individual remains in care.

3. Subsidized Adoption

<u>Prior to adoption</u>, follow above guidelines for family foster care. Refer to Subsidized Adoption Manual Service Chapter 617-05 for further information.

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Motor Vehicle Operation by Youth in Foster Care 623-05-15-30-07

(Revised 11/1/10 ML #3250)

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The complete DHS policy related to operation of motor vehicles by youth in foster care is found in NDDHS Manual Chapter 622-05-60.

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Permanency Planning/Foster Care Child and Family Team Meetings 623-05-15-30-10

(Revised 1/26/07 ML #3051)

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Responsibility for Permanency Planning/Foster Care Child and Family Team meetings rests with the custodian.

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Dispute Resolution 623-05-15-30-15 (Revised 8/15/06 ML #3025)

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This section applies to a situation where it is unclear which county has financial responsibility. The county directors have agreed to dispute resolution as follows: County directors of the involved counties will work it out, and if there is a problem, they will involve their state's attorneys.

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Payment on CCWIPS 623-05-15-30-20 (Revised 8/15/06 ML #3025)

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Refer to CCWIPS User Manual for technical assistance related to entering foster care payments on the CCWIPS system.

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Interstate Compact Related to Children Receiving Foster Care Payments 623-05-15-35

(Revised 8/15/06 ML #3025)

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When a child is placed for foster care in another state the placement will be made through Interstate Compact on the Placement of Children (ICPC) and the child does not by such absence lose legal residence in North Dakota.

If parents move from North Dakota, eligibility for foster care payment with respect to residence continues in North Dakota.

When North Dakota is the receiving state in an Interstate Compact placement and the child is placed in a licensed family foster home, the sending agency must reimburse the foster home at a rate consistent with North Dakota's foster care prevailing reimbursement rate.

North Dakota agencies placing (sending) a child in another state through Interstate Compact will reimburse the foster home in the receiving state at the receiving state's prevailing rate. ICPC approval is necessary prior to making any foster care payments. Foster Care funds cannot be used to fund an illegal placement.

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Payment Eligibility Requirements 623-05-15-40 (Revised 8/15/06 ML #3025)

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Foster care payment is available to any <u>needy</u> child under 21 years of age who is living in a <u>licensed</u> child care facility, and:

- 1. Who has been deprived of parental support or care by reason of death, continued absence from the home, physical or mental incapacity, or under/unemployed parent, of the parent; or
- 2. Who is abandoned by his parent, guardian, or custodian; or
- 3. Whose parent, guardian, or custodian is unable, neglects, or refuses to provide proper or necessary subsistence, education, medical or surgical care, or other care necessary for his safety, health, morals, or well-being; or
- 4. Who is living in a pre-adoptive home and requires a subsidy for medical assistance and/or maintenance.

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Child Support Enforcement: Parental Responsibility for Children in Foster Care 623-05-15-45

(Revised 11/1/10 ML #3250)

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N.D.C.C. Section <u>50-09-06.1</u> applies to all foster care for children, regular and Federal match.

An application under this chapter is deemed to create and effect an assignment of all rights to support, which a family member or foster child may have or come to have, to the state agency. The assignment:

- 1. Is effective as to all current and accrued support obligation and periods of eligibility;
- 2. Is limited to the total cost of benefits provided to the family or foster child; and
- 3. Terminates when eligibility ceases, except with respect to any support obligation unpaid at that time.
- 4. Is not effective as to any child subject to a benefit cap imposed under section 50-09-29.

Federal law requires states to take all necessary steps to enforce the assignment of support rights and, if necessary, establish support orders on behalf of children receiving foster care. N.D.C.C. Section 50-09-06.1 provides that all support obligations are automatically assigned to the state when it is determined that a child is eligible for foster care. The assignment is not conditioned upon the consent of the parents. See Service Chapter 447-10 for policy and procedures relating to child support referrals.

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Responsibility for Maintenance Payments 623-05-15-45-05

(Revised 11/1/10 ML #3250)

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Children enter foster care for a variety of reasons. Some children need very temporary foster care while others require long-range plans. For purposes of the parent participating in the payments for foster care, County Social Service Boards must refer to Child Support Enforcement all foster care cases, with two exceptions. A referral will not be made against either parent;

- 1. If one of both parents receive a subsidized adoption payment on behalf of a child in foster care, or
- 2. If the child's placement was short-term. For purposes of this exception, "short-term" is defined as follows:
 - a. The child exited the placement by the time the referral would be sent, and
 - b. The child was in the placement for 60 days or less.

Both criteria a and b must be met in order for the referral to be eliminated (i.e., not made). If the child is in placement at the time of referral, a referral is made regardless of the amount of time the child has been in placement.

The Department of Human Services uses automated systems to transmit and receive referrals. The referral information sent to Child Support Enforcement is used to establish paternity, locate the absent parent(s), and establish and enforce a support order. The referral may be transmitted by the County Social Service Board to Child Support Enforcement at any time following placement, but must be transmitted at time of initial payment authorization, at the latest.

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REPEALED Forms for Use in Foster Care/Child Support Payments 623-05-15-45-10

(Repealed 11/1/10 ML #3250)

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Notice of Closing of Foster Care Case 623-05-15-45-15 (Revised 11/1/10 ML #3250)

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If the case has been referred to Child Support Enforcement, the County Social Service Board shall notify the Regional Child Support Enforcement Unit when the referral should be closed.

This notice of closing is transmitted through the automated system used by the Department of Human Services. Information entered into the system which results in the transmittal must be timely entered to ensure adverse action is not taken on a closed foster care case and any payments received by Child Support Enforcement's State Disbursement Unit are disbursed to the appropriate payee.

Reasons for a notice of closing include a child returning home, a child entering a non-paid placement, or a child entering a PRTF.

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Certification 623-05-15-50 (Revised 8/15/06 ML #3025)

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The county social service board is legally responsible for providing assistance to persons in need. Certification of eligibility for Foster Care Maintenance Payment is the responsibility of the county social service board that has financial responsibility for the foster care payment. When SFN 641, Title IV-E/Title XIX Application Foster Care, is completed, the county social service board determines eligibility for foster care payments. When the county enters and authorizes a payment on CCWIPS, the county is certifying that all information is true and correct and according to policies of the North Dakota Department of Human Services and federal HHS related to foster care payment. The authorization (PINs) is your electronic signature validation of the above.

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REPEALED
Redetermination of Need 623-05-15-55
(Repealed 11/1/10 ML #3250)

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Permanency Planning/Foster Care Child and Team Meeting Reports 623-05-15-60

(Revised 11/1/10 ML #3250)

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The custodian/supervising agency has responsibility for preparing periodic reports. This includes the FRAME Initial Case Plan and the Permanency Planning Committee/Foster Care Child and Family Team Meeting Progress Report. The initial case plan must be completed within 30 days of placement. Permanency planning/Foster Care Child and Family Team Meetings are done on a quarterly basis.

Initial case plan and permanency planning/Foster Care Child and Family Team meeting periodic review information are available on-line in the FRAME (computer) system. Note required distribution of case plan and case review documents. County, regional, and state office personnel have electronic access. Print copies for other agencies and facilities as needed.

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Adoptive Prior to Finalization 623-05-15-63 (Revised 11/1/10 ML #3250)

View Archives

The LCPA social worker is responsible for scheduling family team meetings with the regional supervisor for those children who are in adoptive placement and prior to finalization.

The SFN 902 and 903 (Initial Case Plan and periodic Review Document) will continue to be used by LCPAs for children pending adoption finalization. When the adoption agreement has been signed, the team meeting documents will be completed by the LCPA social worker, staffed with the family team and forwarded to the appropriate county for data entry on FRAME.

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Voluntary Parental Placement Policy 623-05-15-65 (Revised 4/12/13 ML #3369)

View Archives

The voluntary placement agreement is an agreement between parents and the agency, with the approval of the regional supervisor, for up to 45 days of placement. This option is available for youth <u>under the age of 18</u> whereby a court order is not obtained. This agreement is rarely used as the State cannot participate in payment. Payment is the sole responsibility of the county that enters into the voluntary agreement. Due to the minimal usage and the fact that payments are not generated through the CCWIPS system, these children should not be entered into FRAME. CFS will be removing this option from FRAME.

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Prolonged Foster Care Placement with no Judicial Determination of Deprivation, Unruliness or Delinquency 623-05-15-70

(Revised 8/15/06 ML #3025)

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The department is concerned that foster care court orders deal with the needs of the child being placed. To meet federal requirements, orders need to reflect the needs of and planning for the child, rather than dealing with the needs of the parent.

The state will not participate financially in reimbursement for any prolonged (beyond 30 days) placements where there is no finding of deprivation, unruliness or delinquency regarding the child and where no hearing is pending.

Individual case-related questions regarding this should be directed to the regional human service supervisor.

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Division of Juvenile Services (DJS) Foster Care Payments 623-05-15-75

(Revised 5/1/10 ML #3220)

View Archives

The DJS representative should make every effort to get the parents involved in the payment process. This includes getting the parents to complete the application for assistance and any other procedures that must be fulfilled to determine the child's eligibility for foster care payments. If the parents cannot be involved in this process for whatever reason, the DJS representative is responsible for completing the Application for Assistance on behalf of the foster child(ren).

In order that the foster care payment is issued correctly and on time, the DJS representative will notify the county Eligibility Worker promptly by use of the Placement Notification form the date that the youth enters foster care and when the youth leaves such care.

Children who are removed from their home and initially placed in the Youth Correctional Center (YCC), or non-foster care arrangement, are not to be entered into FRAME. If at a later point the child enters a paid foster care placement, the case should then be entered into FRAME. Accordingly, a case plan is required within 30 days from the date the child is placed in a paid foster care placement and all foster care requirements must be met.

Children who are subsequently moved to YCC, or to a non-foster care arrangement, and who are expected to return to a foster care setting should continue to be open in FRAME and included in the AFCARS reporting population. The child's move should be reported as a placement change and recorded as an institutional foster care setting. If, however, DJS does not expect the child to return to a foster care setting, the child may be closed in FRAME as of the date the child left the foster care situation and a reason for discharge should be entered.

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It is hoped that all the agencies involved in this process will cooperate to the best of their ability in order to have procedures completed as quickly as possible so that the child's needs can be met.

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School Lunch Program Eligibility 623-05-15-80 (Revised 6/1/11 ML #3270)

View Archives

The School Lunch Program is administered by the Department of Public Instruction and supervised by the local school administrator.

The Healthy, Hunger-Free Kids Act of 2010 provides categorical eligibility for free meals to foster children. The school or child care must be notified that the child is a foster child. Once notified, the school/child care must serve meals to those children free of charge. Proof that the child is in foster care may be requested.

This categorical eligibility does not apply to informal arrangements that may exist outside of State or court-based systems.

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Medical Assistance (Title XIX) for Children in Foster Care 623-05-15-85

(Revised 8/15/06 ML #3025)

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The determination of Medical Assistance is the responsibility of County eligibility staff. Immediate communication between eligibility and Social Service staff is vital in order to properly open and maintain Foster Care cases.

At the time of eligibility determination for Foster Care, eligibility staff will also make determination for medical eligibility. Subsequent to that eligibility determination, eligibility will be determined monthly on VISION.

A Medicaid Identification Card is issued to each Medicaid recipient shortly after Medicaid eligibility has been established. The foster child will receive such a card. The Medicaid Identification Card must accompany the child if placements change, whether the child is in care in a family foster home, group home, or residential facility.

Case specific medical eligibility questions should be referred to the Medical Assistance division or county eligibility staff. Refer to North Dakota Department of Human Services Medicaid Eligibility Factors, Service Chapter 510-05.

Children eligible for Title IV-E Foster Care (AFDC rules of 7-16-1996) are by that determination considered Categorically Needy and eligible for Medical Assistance.

Children in foster care who do <u>not</u> meet Title IV-E, EA, or Regular Foster Care criteria, including those who receive SSI, are subject to the eligibility requirements for the Medically Needy as set forth in Service Chapter 510-05, Medicaid Eligibility Factors.

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For Medical Assistance purposes, family foster care homes and foster care group homes are considered specialized facilities. The Medically Needy income level for an individual in a specialized facility can be determined by referring to Service Chapter 510-05.

In all cases, the family's insurance coverage must be utilized.

Foster care providers must be informed of the medical services available and procedures for obtaining authorizations for payment of medical care for foster children.

If foster care payments are closed and the child remains in licensed or approved foster care under supervision, the county social service board may keep the case open for Medical Assistance. Certification for continuing medical payments is subject to eligibility provision of the Medical Assistance Program. The determination of Medical Assistance eligibility is the responsibility of county eligibility staff. Close communication with social service staff will be vital in order to properly maintain foster care cases.

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Health Tracks 623-05-15-87 (Revised 1/26/07 ML #3051)

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Federal Law specifies that all persons under 21 years of age who are eligible for medical services through Title XIX, including children in Foster Care, MUST be informed of Health Tracks (formerly Early Periodic Screening, Diagnosis, and Treatment services) which is designed to detect health problems at an early stage. Persons who must be informed of Health Tracks include: the parent, the county social service board director or agency representative for children receiving Foster Care under a "Parental Placement Agreement," and the county social service board director of the county having legal custody of a child receiving foster care or the persons given legal custody by the court. The Health Tracks informing and referral form must be signed by these appropriate individuals to show evidence that Health Tracks services were offered.

Parental consent should be obtained for Health Tracks screening, diagnosis, and treatment unless legal custody has been removed from the parents. If custody has been removed from the parents, the one having legal custody or guardianship would be in a position to give a valid consent for Health Tracks. If no valid consent is available, only non-intrusive screening (no immunizations or blood work) is provided.

The following questions should be asked when considering whether Health Tracks screening is appropriate.

- 1. Has the child had a complete physical exam within the past year?
- 2. Has the child had a dental exam with the past year?
- 3. Has the child had a vision test within the past year?
- 4. Has the child received a hearing test within the past year?
- 5. Are the child's immunizations up-to-date?

If any of the above questions are answered "no," it is recommended that screening services be obtained. The county director or agency representative responsible for the child should determine the

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appropriateness of Health Tracks screening depending upon individual circumstances and the length of placement.

Matching Symbols 623-05-15-90 (Revised 8/15/06 ML #3025)

View Archives

Originally funding for the Foster Care Payment Program was a county and state responsibility. Additional sources of funds have been utilized, as they have become available, such as, AFDC with federal participation.

FOSTER CARE	SYMBOL	SOURCE OF FUNDS FOR MAINTENANCE	
Federal Matching	FM	Federal participation with 25% county and 75% state sharing of non-federal funds (same as former AFDC formula)	
Federal Matching Non-reimbursable (Title IV-E eligible/not reimbursable)	FN	75% state and 25% county	
Federal Matching Indian	NA	Federal participation and 100% state funds for non-federal share	
Regular	RM	25% county; 75% state	
Regular Match Indian	NR	100% state	
Federal Matching Sub-Adopt	SA	Federal participation with 25% county and 75% state sharing of non-federal funds - same as AFDC formula (see DHS Manual Chapter 617-05, Sec. 05-20-10(5)	
Federal Matching (Native American	SF	Federal participation and 100% state funds for non-federal share	

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Sub-Adopt)		(formerly paid foster care using FM. IND. code)
Regular Sub-Adopt	SR	25% county and 75% state - same as regular foster care formula (see DHS Manual Chapter 617-05, Sec. 05-20-10(5))
Indian Sub-Adopt	SN	100% state funds (formerly received foster care using Ind. Code)
Emergency Assistance (10/1/1999)	EA	75% federal and 25% county

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FN/RM Match Symbol 623-05-15-95 (Revised 8/15/06 ML #3025)

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When a Title IV-E eligible foster child receives SSI, s/he is Title IV-E non-reimbursable due to the receipt of SSI.

Example: Mom with 2 children, one child receives SSI. Mom and other child are in receipt of TANF benefits. Child with SSI is placed in foster care and because the SSI is more than the cost of care, the county continues to receive the SSI payment. In this example, the foster child is Title IV-E eligible, however not reimbursable due to the continued receipt of the SSI and the proper match code in this example would be "FN."

To be Title IV-E eligible the removal home must, during the removal month, meet the AFDC means, deprivation, the IV-E legal status, and the judicial language tests. If the child is not IV-E eligible then the case is regular match "RM."

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NA/NR Match Symbol 623-05-15-100 (Revised 8/15/06 ML #3025)

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The NA and NR match symbols are limited to the ten counties of financial responsibility as noted in Service Chapter 447. These match symbols apply to any Native American foster child whose parent(s) lived on the reservation at the time the child entered foster care.

The only two instances where the "NR" code should be used is when you have a "NA" Federal Matching Indian case and there is a secondary placement, or you have a "NA" case where DJS has custody and the child is not IV-E eligible.

A child under tribal custody who is coded Native American Federal Match "NA" will lose Title IV-E eligibility when s/he turns 18 years of age and will not graduate prior to age 19. The case must be closed as of the last day of the month in which s/he turns 18. At this point, the tribe becomes financially responsible.

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Match Symbol for Secondary Placements 623-05-15-105 (Revised 8/15/06 ML #3025)

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For a Title IV-E eligible foster child, "FM" who is placed into a secondary placement (i.e. pre-placement visits), the secondary placement must be coded "FN."

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Payment Factors 623-05-20

Payment - General Principles 623-05-20-05 (Revised 6/1/11 ML #3270)

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All foster care payments are paid the month following the month in which they are incurred. When a child moves from one home to another during a month, payment should be made to each home for the day of the move. This is an exception to the general rule that prohibits overlapping payments.

An overlap of payments for discharge and placement dates is not allowed when a child is moved to a different level of facility care within an umbrella agency; i.e. when a child moves from Dakota Boys Ranch PRTF to Dakota Boys Ranch RCCF. Example:

	Start Date	End Date
DBR - PRTF	1/1/03	6/14/03
DBR - RCCF	6/15/03	

Features of the CCWIPS system are:

- 1. Providers will receive one check during the regular monthly check write, for all children in care.
- 2. The monthly check will be accompanied by a remittance advice showing each segment of every payment for each child's care included in the check.
- 3. The main check write will be the second to the last working day each month, with the opportunity to issue weekly supplemental checks.
- 4. All maintenance payments will be paid at a daily rate. This means that check amounts will vary from month to month. The remittance advice accompanying the check will provide a detailed explanation.

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- 5. County social services, Division of Juvenile Services, and Regional Human Service Centers are responsible for entering FRAME data to generate the check. Current information on the court order, permanency plan, placement, and license must be on the system to generate payment. If part of this information is missing, a check may be generated for a partial payment, or no check generated, depending on specific circumstances. When the information is current and complete, a supplemental check may be issued if partial payment has been made.
- 6. Questions about the timeliness or amount of a foster care payment will be directed to the county office responsible for processing the payment.
- 7. Questions regarding subsidized adoption payments can be directed to the state office.
- 8. Deductions from foster care maintenance payments cannot be withheld from unpaid obligations incurred by the foster care provider on behalf of the foster child, such as child care, etc. Such obligations are the responsibility of the foster care provider.

Retroactive Payments

Retroactive payments in excess of 90 days are not allowed.

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Reimbursement by County 623-05-20-10 (Revised 8/15/06 ML #3025)

View Archives

County responsibility for reimbursement to the state regarding foster care is handled according to N.D.C.C. Section 50-09-21.1, for all periods after January 1, 1998.

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Remitting Overpayments/Reimbursements 623-05-20-15 (Revised 1/26/07 ML #3051)

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Any payments to the state for foster care refunds and reimbursements must be submitted with credit form, <u>SFN 827</u>, from DHS/Fiscal Administration only. The proper name and <u>foster care</u> case number must be included to ensure proper credit.

Example One: County worker receives a check from the facility for reimbursement of care costs by BC/BS. This would be entered as accounts receivable on CCWIPS and coded as other income as per CCWIPS User Manual. The county would then send the BC/BS payment to the State Finance office for credit towards the overpayment.

Example Two: The child in foster care receives monthly income of Social Security Survivors benefits. This would be entered as income for the child and the amount of care costs forwarded to the State Finance Office to be credit towards the care costs. Keep in mind, any money in excess of the care costs will be handled as per Manual Chapter 447-10-20-20-20. Refer to the CCWIPS User Manual for procedures regarding accounts receivable.

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Recoupment of Foster Care Overpayments 623-05-20-20 (Revised 11/15/13 ML #3392)

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The CCWIPS payment system has the ability to recoup overpayments from family and residential foster care providers for amounts due the Department. The system has the ability (state office functionality only) to automatically subtract any debits (such as the overpayment) to that provider for any foster child, and issues the check to the provider for the difference.

The procedure for overpayment recoupment is as follows:

- 1. Overpayments made to family foster homes are recouped on the CCWIPS system in the month following the month the overpayment is set up, assuming that any foster child is residing in the home and/or a payment is being made to that family foster home. This direct recoupment is a state office function only.
- 2. If no payment is due the foster home in the month following the month the overpayment is set up, the county collects the overpayment from the foster home and send the overpayment remittance to Fiscal Administration in the same manner as in the past.
- 3. The department will age unresolved balances and at the three month point will bill the financially responsible county dollar for dollar, with the exception of the Indian counties which will be dealt with on a case-by-case basis.

Payment Rates 623-05-20-25 (Revised 7/15/14 ML #3411)

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The standard family foster care maintenance rate includes the cost of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child's personal incidentals, and liability insurance with respect to a child.

The family foster care maintenance rate is computed by month and includes an amount for clothing and incidentals. The rate effective July 1, 2014, is as follows:

	BASIC	CLOTHING AND	COMPUTED
AGE	RATE	INCIDENTALS	MONTHLY
0 - 4 Years	\$702.74	\$50.00	\$752.74
5 - 12 Years	\$802.90	\$60.00	\$862.90
13+	\$876.66	\$70.00	\$946.66

Payments are made using the daily rate times the number of days in care.

	COMPUTED	PAID
AGE	MONTHLY	DAILY
0 - 4 Years	\$752.74	\$24.75
5- 12 Years	\$862.90	\$28.37
13+	\$946.66	\$31.12

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To the above rates the county social service board may, on the basis of individualized need, add the cost of irregular items allowed in foster care maintenance.

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Absences from Home/Facility 623-05-20-30 (Revised 3/1/07 ML #3070)

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If a child is out of a home for two weeks or less under a plan which meets the approval of the county social service board, no reduction in a monthly payment is required.

Reduction in the amount of the requested payment is required in case of receipt of income from other sources.

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Maintenance Rate - Therapeutic Foster Care 623-05-20-35

(Revised 3/13/15 ML #3434)

View Archives

Professional Association of Treatment Homes (PATH)

When a child is placed in a PATH home, there are three options for payment. The rate effective July 1, 2014, is as follows:

- The PATH Therapeutic rate of \$105.03/day will be paid for <u>all</u> children who are receiving treatment foster care services through PATH programs.
- A rate of \$64.30/day will be paid for <u>all</u> children in the PATH regular foster care (PATH provides case management) and step-down programs. (This amount is separate from treatment costs, which are directly billed to Medicaid by PATH).
- The county age appropriate foster care rate will be paid in situations where siblings are placed in the same PATH foster home and one of the siblings does not need a therapeutic level of care. In this case the child's case manager will provide case management and supervise the placement.

PATH-ND (Professional Association of Treatment Homes)

1202 Westrac Dr S, Suite 100

Fargo, ND 58103

Phone: 701-280-8545

Billing Address:

PATH ND

Rice Creek Professional Building 5985 Rice Creek Pkwy, Suite 202

Shoreview, MN 55126

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Payments to PATH should not be authorized unless you have a billing statement for the appropriate month. "PATH and the Department of Human Services will review PATH foster care maintenance rates quarterly. Therefore it is possible that the daily rate will change on a quarterly basis."

The legal custodian and the youth's service team will evaluate the youth's progress to determine the appropriate level of care. If placement in the PATH Step Down option is appropriate, the legal custodian and PATH will sign the needed documentation at the team meeting. The County/DJS case manager will be responsible to notify the eligibility worker at the appropriate county.

For payment purposes the effective date for the PATH Step Down rate must be the first of the month. It will not be possible to pay for a partial month of care. The PATH Step Down rate will continue to be effective until the child leaves the PATH program, or eligibility staff is notified otherwise (e.g. escalation of child's behavior).

For PATH-ND, the PATH Therapeutic Rate, Step-Down Rate, and PATH Family Foster Care Rate includes all irregular payments with the exception of Category 70, Parent/Infant, and Category 50, Code 53, related to school transportation costs. PATH-ND bills the financial county for the Foster Care rate and PATH-ND pays the foster parents directly. The financial county authorizes the payment on CCWIPS with the above PATH-ND address as payee.

If a child is in a PATH Home paid at the standard family foster care rate, this child is eligible for irregular payments. Refer to CCWIPS Manual for technical assistance.

Refer to CCWIPS User manual for technical assistance related to entering PATH-ND foster care payments on the CCWIPS system.

Medicaid eligibility must be determined prior to referral of a child to PATH-ND. The treatment (rehabilitation) amount may be paid by Title XIX, or some other resource. IT CANNOT BE PAID THROUGH FOSTER CARE.

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Payment to Foster Care Group Homes, Residential Child Care Facilities 623-05-20-40

(Revised 3/13/15 ML #3434)

View Archives

Agencies have the right to set their own rates for care of children; the North Dakota Department of Human Services and county social service boards have the right to determine what services will be purchased. The foster care payment program is a resource to parents and county social service boards in meeting the cost, provided it has been determined by the county social service board and/or regional staff that a particular type of care is appropriate.

A group or residential care facility, as a free enterprise, may establish what rate it will charge for its services. The Department of Human Services, as a purchaser of services, may determine what rate it will pay. Refer to NDAC 75-03-15, "Rate Setting for Providers of Services to Foster Children Group Home and Residential Child Care Facilities." Since 1967, the rules of HHS have offered some degree of federal financial participation for certain identified cost items of group/residential care facilities. From time to time, the specific items for which there is federal financial participation have changed but the general rule is that in establishing rates of payment for group care only those items considered as care in family foster homes will be included for federal financial participation.

The foster care maintenance rates at child care facilities include board, room, care, clothing, personal supplies, education, and recreation. Telephone costs are not to be charged to foster care payments. The cost of social services and psychological evaluations are not chargeable to the maintenance payment for foster care.

To open foster care payments for group, residential, or therapeutic family foster care, an approval by the regional supervisor is required. This is now completed electronically on the FRAME system. The entire approval process is documented on the FRAME system (permanency planning, foster care

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court order with requisite foster care language, etc.) and the regional supervisor approves or denies electronically on the FRAME system.

In any situation where a hard copy is needed, please screen print the approval.

Administrative costs to facilitate reunification are available for reimbursement to eligible families as an irregular payment on CCWIPS for facilities. Note that this section applies to costs for the child's family, not the child. Examples of these costs are family expenses, meals, lodging, occasionally mileage, or commercial transportation to facilitate visitation or participation in family week with a child in foster care at a facility.

We will pay actual costs up to the amount of state per diem rates. Costs will be reimbursed based on North Dakota in-state rates, even if travel is to another state facility. Commercial transportation will be reimbursed at the actual rate. The facility and case manager are expected to seek the lowest possible rate when commercial transportation is required.

For foster care billing purposes, these costs are considered as a Reunification costs and entered as an irregular payment on CCWIPS, Category 50, Code 52. Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

Verification of expenditures are required and must be retained for audit purposes.

Daily Maintenance Rates -- Group and Residential Child Care Facilities

	EFF. DATE	DAILY RATE
Charles Hall Youth Services	10-01-14	(F) 227.30
P.O. Box 1995		
Bismarck, ND 58502-1995		

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Dakota Boys Ranch Assn. (Residential Child Care Facility) Box 5007, Minot, ND 58702-5007 Includes: (Fargo Youth Home) (Does not include Dakota Boys Ranch Assn. PRTF) (Does not include DBR Fargo Safe Home)	01-01-15	(F) 307.73
Pride Hope Home PO Box 4086 Bismarck, ND 58501 (License effective 1-30-15)	01-01-15	(F) 335.89
Eckert Youth Homes Box 2291 Williston, ND 58802	07-01-14	(F) 236.95
Harmony House 406 4th Avenue Devils Lake, ND 58301	01-01-15	(F) 139.23
Home on the Range 16351 I-94 Sentinel Butte, ND 58654- 9500	04-01-14	(F) 258.75
Prairie Learning Center 7785 St. Gertrude Avenue Raleigh, ND 58564-4103	07-01-14	(F) 234.18

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Lake Oahe Group Home of Standing Rock Nation*	07-01-14	(F) 196.12
P.O. Box 176		
Fort Yates, ND 58538		

Please note this is maintenance rate only. Service rehab rate is additional and billed separately. Effective July 1, 1997, the service rehab rate is billed directly to the Medical Services Division, North Dakota Department of Human Services.

* Approved facility for tribe.

D Desk Rate

F Final Rate

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Payment for Child-Care Agencies 623-05-20-45 (Revised 8/15/06 ML #3025)

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When a county social service board refers a child to another agency, the county social service board should inform the agency of the plan for payment. Unless there is an arrangement for private payment, the county social service board should take the initiative in determining eligibility for foster care payment.

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Out-of-State Placements in Foster Care Group Home or Residential Child Care Facility - Procedure 623-05-20-50 (Revised 6/1/11 ML #3270)

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Prior to a child being placed in group care or residential child care outside of North Dakota, the following steps must be accomplished:

- 1. Court Order with the required findings.
- 2. Psychological Evaluation.
 - a. To help the caseworker and the family team identify the treatment needs of the child.
 - b. To provide information to the case manager and the family team which will help them in selecting the appropriate treatment facility for the child.
- 3. Family team review of the social information, educational information, psychological evaluation, and case plan, together with review of the proposed placement to insure it is consistent with permanency planning and state policy. Children placed in family or residential child care out of North Dakota must be visited in their placement setting by a caseworker from either state every month, and a report on the visit submitted to Children and Family Services, North Dakota Department of Human Services. How visitation and reporting will be accomplished needs to be considered in planning for the child. Permanency planning requirements (624-05) shall serve as a guideline in assuring conformity with state policy.
- 4. Interstate compact procedures must be followed.
- 5. Foster youth who require residential care must be referred to <u>all</u> <u>appropriate</u> facilities within North Dakota before consideration is given to out-of-state facilities. Out-of-state referrals can be made when it has been determined that the child's needs cannot be met within North Dakota. Copies of denial letters must be included in all ICPC referral packets. If any denial letter is not available when an ICPC referral is submitted to CFS, a notation in the cover letter must identify the referral facility and the reason the child cannot be served in the facility. If a youth is being referred to an out-of-state PRTF,

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- Medical Services must approve the out-of-state referral as well as ICPC. Concurrent referrals through Medical Services and ICPC are suggested to expedite placement decisions.
- 6. Children ages 13 and under: If a child age 13 and under appears in need of out-of-state residential care, an evaluation and assessment must be done by PRIDE-Manchester House to determine the need for residential care, to co-develop a treatment plan, and to determine whether the child's needs could be met at PRIDE-Manchester.
- 7. The Regional Supervisor will consult with the foster care administrator in the pre-placement planning stages if information is needed regarding an out-of-state facility (i.e. foster care licensure status, appropriateness for specific problems, reimbursement, and our experience with the facility). Children and Family Services maintains resource material regarding facilities appropriate for foster care placement.

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Rate Setting for Group Facility's RCCF's 623-05-20-55 (Revised 1/26/07 ML #3051)

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A group or residential care facility, as a free enterprise, may establish what it will charge for its services. The Department of Human Services, as a purchaser of services, may determine what rate it will pay. Refer to NDAC 75-03-15, "Rate Setting for Providers of Services to Foster Children in Group Home and Residential Child care Facilities." Since 1967, the rules of DHS have offered some degree of federal financial participation for certain identified cost items of group/residential care facilities. From time to time, the specific items for which there is federal financial participation have changed but the general rule is that in establishing rates of payment for group care only those items considered as care in family foster homes will be included for federal financial participation.

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Periodic Reports for Placements in Group Care Facilities 623-05-20-60

(Revised 1/26/07 ML #3051)

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Each three months after placement, the group care facility will make a periodic report on each child in care. The report will be sent to the regional center of the region in which the group care facility is located. That regional center from which the child was referred will have the responsibility for providing a copy of the report to the county having administrative responsibility for foster care payment and the placement agency, if different from the county of administrative responsibility, or having legal custody.

The reporting requirement for a youth in the custody of the Division of Juvenile Services fulfills the social service reporting requirement for foster care payments.

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Chapter 05

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Specified Caregiver - Alternate Permanency Placements - Changes 623-05-20-65

(Revised 1/26/07 ML #3051)

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The Adoption and Safe Families Act (ASFA) regulations effective March 27, 2000, require a significant change in practice related to long-term foster care. The changes are consistent with discouraging the use of long-term foster care, and the preference for another permanency arrangement for the child such as adoption or guardianship. Throughout the new federal regulations related to ASFA, you will note reference to "another planned permanent living arrangement," and few, if any references to long-term foster care.

The Supplementary Information to the federal regulations issued January 25, 2000, clarifies that it is not permissible for courts to extend their responsibilities to include ordering a child's placement with a specific foster care provider. The child's placement and care responsibility must be with a public agency (the State agency or another public agency with whom the State agency has an agreement).

Once a court has ordered a placement with a specific provider, it has assumed the State agency's placement responsibility.

The terminology regarding "dispositional hearing" has been replaced in ASFA at 475(5)(c) by "permanency hearing." The requirements at 475(5)(c) require a permanency hearing no later than 12 months after foster care entry, and not less frequently than every 12 months thereafter," which hearing shall determine the permanency plan for the child that includes whether, and if applicable, when the child will be returned to the parent, placed for adoption and the State will file a petition for termination of parental rights, or referred for legal guardianship, or (in cases where the State agency has documented to the state court a compelling reason for determining that it would not be in the best interests of the child to return home, be referred for termination of parental rights or

Division 20 Program 600 Service 623 Chapter 05

to be placed for adoption, with a fit and willing relative, or with a legal guardian) placed in another planned permanent living arrangement. . . . "

1356.21(h)(3): Federal Regulation effective 3/27/2000

If the State concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency plan for a child is placement in another planned permanent living arrangement, the State must document to the court the compelling reason for the alternate plan The requirement for the 12-month permanency hearing (and every 12 months thereafter) applies to the child "in another planned permanent living arrangement."

Children entering "another planned permanent living arrangement":

When other options such as reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative have been ruled out, and it is concluded that "another planned permanent living arrangement" is the most appropriate plan for the child, the agency must document to the court the compelling reason for the alternate plan.

The child's case plan along with the "compelling reasons" document must be available to the court for review during the next permanency hearing.

Foster Care Child and Family Team Meeting Requirements:

The quarterly permanency planning reviews now apply to all children in foster care, including those in "another planned permanent living arrangement" (such as long-term foster care). This will ensure that the placement is reviewed and the case plan kept up-to-date for the court's yearly review at the 12 month (or sooner) permanency hearing.

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School District Notification for Foster Care Child Placement Cases 623-05-20-70

School District Notification - General Information 623-05-20-70-05

(Revised 1/26/07 ML #3051)

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NDCC <u>15.1-29-14</u> establishes school district responsibility for the payment of tuition, excess cost and, in the instance of handicapped children, excess educational costs related to special education. This law requires that agencies placing children notify the interested school district of such placements to assure timely and orderly assumption of financial responsibility by the appropriate school districts.

The placing agency shall provide written or electronic notice regarding an initial placement and all subsequent placements to the superintendent of the student's school district of residence and to the superintendent of the admitting district:

- 1. Within five working days after a placement is made under court order;
- 2. Within five working days after an emergency placement is made; or
- 3. At least ten working days prior to any other placement.
- 4. September 15th of each year once established, the resident district remains unchanged until the following September 15th unless the child's placement changes.

The placement agency shall afford the district of residence reasonable opportunity to participate in permanency planning for the child.

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School District Notification - Procedure 623-05-20-70-10 (Revised 11/1/10 ML #3250)

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Department of Public Instructions' (DPI) form, SFN 18119, will serve as the official document in all instances for the notification required by NDCC 15.1-29. Electronic submission is the preferred method of submission. The electronic notification system can be accessed at:

https://secure.apps.nd.gov/dpi/ndteach/sclogin.aspx. This application requires workers to establish a ND State login ID, and link this ID to the placing agency. To determine if you have a current login, see link entitled, "Not Sure?" Also, Login ID users who have forgotten their ID's, or have forgotten their passwords, will have a link on the sign-in page which will provide assistance. If you do not have access to the site, you will need to create a login ID. This can be done by clicking on the link labeled "Register Now". You will be asked to provide your name, company name, address, email, and other security questions which help identify the user. It will be helpful if you save the websites as a bookmark or a favorite for future reference.

Training for the site can be accessed at http://www.dpi.state.nd.us/speced/. Questions related to the form or websites should be directed to Kim Vega, (701) 328-2175 or Kenneth Steiner, (701) 328-1678, in DPI.

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Irregular Payments 623-05-25 (Revised 8/15/06 ML #3025)

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<u>Irregular Payments -- Brief Summary:</u>

With appropriate approval, the eligibility worker will determine whether individual irregular payment expenditures are allowed.

Irregular payments are separated into categories, within which are various codes. Age brackets are consistent with foster care payment age categories. Age brackets are constant in all categories; however, expenditure limits vary by category. Some categories are without limit.

Categories of Irregular Payment 623-05-25-05 (Revised 9/1/10 ML #3239)

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Eight categories of irregular payments have been established:

Category 10	School Supplies/Activities
Category 20	Clothing
Category 30	Emergency Placement
Category 40	Child Care for Foster Child
Category 50	Travel for Foster Child (Limited)
Category 60	Difficulty of Care/Excess Maintenance Payment (EMP)
Category 70	Parent/Infant Payment
Category 80	Extra Supervision

Within each category are various codes related to specific items. This data is available to you on-line for reference in regard to each child's expenditures, and to assist the department in predicting expenditures and building budgets for the foster care program.

Irregular payments have been structured to include various code categories, some categories with expenditure limits. For example, Category 10 includes school supplies, activities, etc. <u>A fixed amount is set for this category</u>, based on the child's age at entry to care in the current foster care episode.

The age brackets have been structured to coincide with the age brackets for the standard (basic) foster care maintenance rate, as follows:

Age Limits	Expenditure Limit/Year
0 - 4	\$200
5 - 12	\$500
13 - Over	\$700

NOTE: For Category 10, there is a yearly expenditure ceiling per child. For example, a child age 0 – 4 has an expenditure limit for \$50/quarter or up to \$200 year. The year is computed from the first entry to care. If a child enters and leaves care during the same year, the yearly limit remains the same. The "expenditure limit/year" is a maximum amount per child limit regardless of multiple entries to foster care during that year.

The policy provides for an increased expenditure and sets an expenditure ceiling. It does not allow for exceptions.

It is the responsibility of the case manager to work with the county to determine which expenditures are necessary and appropriate, and to budget the age appropriate expenditure limit so it is available throughout the year for the child's needs.

All expenditures require receipts. Expenditures must be in accordance with state and federal foster care policy. The county certifies by "pinning" the irregular payment information on the appropriate CCWIPS screen that the expenditure is in accord with state policy. Receipts must be retained in the appropriate foster care file for audit purposes.

Irregular Payments Restructured – Overview:

<u>Irregular Payments in Therapeutic Foster Family Care:</u>

The Parent/Infant Payment (Category 70) and reasonable transportation costs related to maintaining a foster child in the school which he/she was

Division 20 Program 600 Service 623 Chapter 05

enrolled at the time of placement (Category 50, Code 53) are the only irregular payment that applies to therapeutic family foster care.

Irregular Payments in Group & Residential Care:

The irregular payment policy has very limited application to children in group and residential care, as rate setting in those instances is dictated by N.D.A.C. 75-03-15.

<u>Irregular Payments in PRTF's:</u>

Foster care funds cannot pay for any portion of a child's cost of care in a PRTF, including irregular payments. Allowable transportation costs for the child and family, as outlined in this service chapter, should be submitted on the SFN 119 for reimbursement to the county social service board.

Other types of irregular payments can be included in the PRTF's direct rate based on historical costs as outlined in N.D.A.C. 75-02-09-06. Examples:

- "Clothing necessary to maintain a resident's wardrobe."
- "Personal supplies used by an individual resident."
- "School supplies and activity fees, when not provided by or at the expense of the school."
- "Costs incurred for providing recreation to the residents including subscriptions, sports equipment, and admission fees to sporting, recreation, and social events."

Extra supervision to maintain a placement can also be included in the facility's direct rate.

 "The Department may provide for an increase in the established rate for additional costs necessary to add services or staff to the existing program."

<u>Irregular Payments in Family Foster Care:</u>

This irregular payment policy applies to children in family foster care.

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An irregular payment is an allowable maintenance payment added to the standard (basic) foster care maintenance rate. This expenditure is approved based on the need, in accordance with state and federal policy, and entered by the county on the appropriate CCWIPS payment screen. Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Charts - Irregular Payments 623-05-25-10 (Revised 8/15/06 ML #3025)

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Chart A

The chart entitled "Categories & Codes – Irregular Maintenance Payments – Family Foster Care" outlines the categories, ages, and expenditure limits, and the approval process. Note that several categories are without expenditure limit, such as child care for foster child. This is due to factors which make setting expenditure limits for certain categories unrealistic. The custodian and others involved must base expenditure approvals on prevailing rates and other factors. This is merely an example, the same holds true for transportation, and some other categories.

Chart B

The chart entitled "<u>Categories and Codes – Family Foster Care – Irregular Payments – Summary & Examples of Allowable and Non Allowable</u>" provides the categories and a brief summary of what is allowable as irregular maintenance and what is not.

<u>Group & Residential Care – Irregular Payments:</u>

The irregular payment policy has very limited application for group and residential care, as rates for those facilities are governed by N.D.A.C. Section 75-03-15.

Please refer to the following:

Chart C

"Categories and Codes – Group & Residential, Irregular Maintenance Payments."

Chart D

"Categories and Codes – Group & Residential Irregular Payment Policy, Examples of Allowable & Non-Allowable Expenditures."

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In all instances, the payment must be appropriate, within foster care guidelines, and be approved through Child and Family Team meetings and the regional supervisor.

The CCWIPS system has edits to alert you to an inappropriate irregular payment for a residential facility.

CFS plans a regular on-going audit sample to identify any problems or issues with the revised irregular payment system.

For technical assistance related to the CCWIPS payment system, please call the Help Line at 1-800-429-8829.

Irregular Payments - Explanation by Selected Categories 623-05-30

Category 10 - School Supplies/Activities 623-05-30-05 (Revised 8/15/06 ML #3025)

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- 1. Field trips, shop supplies, school pictures, class ring.
- 2. Non-clothing athletic equipment/athletic shoes, personal incidentals. (family foster care only)
- 3. Prom dress/tux.
- 4. Camps any type
- 5. Music lessons/lease/purchase of musical instruments
- 6. Individualized circumstances.

The above irregular items must be explained and be within the maximum limits. There will be no exceptions.

All of these expenditures require receipts.

Expenditures under Category 10 cannot exceed the age appropriate limit during a one-year time period. The year begins when a child is initially placed in a foster care "paid" placement. This date is referred to as the "Expenditure Limit Date." If a child was in a foster care "paid" placement for a period of time, returned home, and then went back into foster care, the "Expenditure Limit Date" would remain the same if the return to placement is within the twelve-month period. If, however, the child returned to foster care after the "Expenditure Limit Date" has expired, a new date will be established and the allowance reset for a year from that date.

The following is a case example of the "Expenditure Limit Date" and the "expenditure time period" for a child who enters foster care, leaves, and re-enters care:

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Enters foster care

Child Age 11, Limit \$500

Enters paid foster care setting 6/1/03*

Expenditure Limit Date = 6/1/03

Expenditure time period = 6/1/03 - 5/31/04

Child returns home 12/1/03 with total

Expenditures in Category 10 = \$450.

The remaining balance in Category 10 = \$50.

A. Same child <u>returns</u> to foster care BEFORE the

"expenditure time period" ends:

Child returns to foster care setting 3/1/04.

Expenditure Limit Date = 6/1/03

Expenditure Limit Date = 6/1/03

Expenditure time period = 6/1/03 - 5/31/04.

Balance available under Category 10 until 6/1/04 = \$50.

B. Same child returns to foster care AFTER the

"expenditure time period" ends:

Child returns to foster care setting 6/14/04.

Expenditure Limit Date remains 6/1/04.

Expenditure time period = 6/1/04 - 5/31/05.

Amount available under Category 10 until 6/1/05 - \$500.

C. Same child <u>returns</u> to a paid foster care setting after a lapse of one year.

"Child returns to a paid foster care setting 12/5/04

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Expenditure Limit Date is reset to 12/5/04.**

Expenditure time period = 12/5/04 - 12/4/05.

Amount available under Category 10 until 12/5/05 - \$500.

- * State is responsible for maintenance payments.
- ** When a child has not been in a paid foster care placement for twelve consecutive months, the expenditure limit date is reset.

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Category 20 - Clothing for Foster Care Children General Information 623-05-30-10

(Revised 11/15/13 ML #3392)

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Foster care children's clothing needs are to be met in accordance with the policies set forth in this chapter, as well as regulations set forth in NDAC <u>75-03-15</u>, concerning reimbursement for residential child care facilities and group child care facilities licensed by the State of North Dakota.

Each child in foster care should have enough clothing for reasonable changes. Adequacy, condition, and styling of garments are particularly meaningful for some children. The worker supervising the case has responsibility for knowing if the child is adequately clothed and if the child has an opportunity to participate in the selection and purchase of a new clothing, if of an age to have such interest. When a child leaves a foster home the child should have with them all the usable clothing, which has been purchased for them.

An inventory must be conducted of a child's clothing prior to any placement or change in placement in foster care. A copy of the most recent inventory should be sent with the child at the time of initial placement as well as all other subsequent placements. A copy shall be kept by the agency making the placement, as well as the financial county.

Clothing Allowances/Family Foster Care

<u>Initial Clothing Allowance - Family Foster Care</u>

The initial clothing allowance is available to a child when he/she enters a paid foster care setting. During the first five months after the child's entry to foster care, the child's clothing needs can be met with an initial clothing allowance, if needed. The initial clothing allowance must be requested/approval received; clothing purchased and receipts submitted to the county – during the first five months. The county has until the end of the sixth month to enter the information on the CCWIPS system to generate payment for the initial clothing allowance.

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In order for a child to receive the initial clothing allowance again, the child must have been out of foster care for a 12-month period (this is a date specific period).

The maximum rates for initial clothing allowances are:

Category	20.	Code	21
Category	~~,	COGC	

0-4 - \$400

5-12 - \$400

13 and over - \$400

Example:

Child, age 11, enters a paid foster care setting on 6/1/13. Initial clothing allowance of \$400 was expended within the first five months of placement. Child returns home on 12/1/13.

This child will not be eligible to receive the initial clothing allowance until he/she has been out of foster care for a 12-month period, or in this case, until 12/1/14. If the child returns to a paid foster care setting prior to that date, the initial clothing allowance will not be available.

The maximum initial clothing allowance must be purchased with the consultation and prior approval of the county having financial responsibility for foster care payments. The financial county must be supplied with receipts for the items purchased. Use Category 20, code 21, "Initial Clothing Allowance." Enter on appropriate CCWIPS screen.

Special Clothing Allowance - Family Foster Care

A special clothing allowance may be authorized to replace clothing lost in a fire, flood, theft, other type of disaster, or for sudden spurts of growth. The special clothing allowance rate is for emergency and extraordinary circumstances and should rarely be used in meeting the needs of the foster child. The special allowance is not an entitlement, but an exception. Use Category 20, code 22, "Special Clothing Allowance." Enter on appropriate CCWIPS screen.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

<u>Summary Chart - Clothing - Family Foster Care</u>

Procedure	
Need basis. Consultation and prior approval of county financial responsibility. Original receipts required.	
Need basis. Consultation and prior approval of county of financial responsibility. Original receipts required.	
Built into daily* rate paid to foster parents.	
Age 0 - 4 \$50	
Age 5 - 12 \$60	
Age 13+ \$70	

Clothing Allowance/Group & RCCF Care

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<u>Initial Clothing Allowance - Group/RCCF</u>

During the first five months after the child's entry to foster care, the child's clothing needs can be met with an initial clothing allowance, if needed. The initial clothing allowance must be requested/approval received; clothing purchased and receipts submitted to the county – during the first five months. The county has until the end of the sixth month to enter the information on the CCWIPS system to generate payment for the initial clothing allowance.

An inventory must be conducted of a child's clothing prior to any placement or change in placement in foster care. A copy of the most recent inventory should be sent with the child at the time of initial placement as well as all other subsequent placements. A copy shall be kept by the agency making the placement, as well as the financial county.

The maximum rates for initial clothing allowances are:

Category 20, Code 21

Child's Age	<u> Maximum Allowance</u>
0 - 4	\$400
5 - 12	\$400
13 and over	\$400

The initial clothing allowance (within above limits) may be purchased, if needed. Direct reimbursement is available to the GROUP/RCCF based on submitting original receipts, which can be traced to the child. The receipts should be submitted to the county having financial responsibility for foster care payment. Prior approval of the county having financial responsibility for foster care payment is required. Use Category 20, code 21, "Initial Clothing Allowance." Enter on appropriate CCWIPS screen.

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Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

Special Clothing Allowance - Group/RCCF

A special clothing allowance may be utilized to replace clothing lost in a fire, flood, theft, other type of disaster, or for sudden spurts of growth. The special clothing allowance rate is for these emergency and extraordinary circumstances and should <u>rarely</u> be used in meeting the needs of the foster child. The special allowance is not an entitlement, but an exception. <u>Prior approval of the county director/designee of the financially responsible county is required.</u> Direct reimbursement is available to the GROUP/RCCF based on the original receipts which can be traced to the individual child. The receipts should be submitted for reimbursement to the county having financial responsibility for foster care payment.

Category 20, Code 22

<u>Child's Age</u>	<u> Maximum Allowance</u>
0 - 4	\$250
5 - 12	\$325
13 and over	\$400

The special clothing allowance is <u>not an automatic payment</u>. It is intended that this be utilized to purchase clothing in the circumstances outlined above and if <u>needed</u>. Use Category 20, code 22, "Special Clothing Allowance." Enter on appropriate CCWIPS screen.

It is anticipated that the maximum initial allowance and the special clothing allowance will be utilized to purchase groups of clothing necessary to meet the child's needs up to the maximums outlined. The child's caseworker and the facility must work together to ensure that the child's basic clothing needs are met.

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Whenever possible, the foster child should be involved in the clothing selection and purchase process to enable the child to learn the economics of budgeting and clothing selection, prepare the child for independence, as well as to afford the child a chance to exercise choices.

There may be exceptions to the above outlined payment procedure for clothing in out-of-state GROUP/RCCF foster care. This is due to the fact that the rates for out-of-state care are set by other states, and clothing may or may not be included in the ongoing rate.

Summary Chart - Clothing - Group/RCCF

TYPE

CLOTHING

ALLOWANCE PROCEDURE

Initial Need basis. Direct reimbursement based on individual receipt that can be traced to

individual child. Prior approval of

director/designee of county having financial

responsibility for foster care payment.

Special Need basis. <u>Prior approval of county</u>

Allowance <u>director/designee of county having financial</u>

<u>responsibility for foster care payment</u>. Direct reimbursement based on individual receipt

that can be traced to individual child.

Regular/ Met with funds provided in rates

On-Going established by NDDHS through provider audit process. Receipts of all clothing purchased for REGULAR/ON-GOING

Division 20 Service 623 Program 600 Chapter 05

Needs CLOTHING NEEDS must be maintained by

facility and will be used in determining the following years approved rate. The receipt must identify the specific child for whom

the clothing was purchased.

Out-of-State GROUP/RCCF Clothing Allowance:

There may be exceptions to the above outlined payment procedure for clothing in <u>out-of-state</u> GROUP/RCCF Care. This is due to the fact that rates for out-of-state care are set by other states, and clothing may or may not be included in the ongoing rate. In out-of-state placements, it may sometimes be necessary to utilize irregular payments for on-going clothing needs.

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Category 30 - Emergency Placements 623-05-30-15 (Revised 11/15/13 ML #3392)

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Payment Information - Other

When a placement requires a decision of critical importance concerning the child, the county having financial responsibility for foster care payment will make the decision in consultation with the custodian. Placements made in critical situations, i.e., <u>emergencies</u> may receive a daily rate of \$35 per day for the first 15 days placement. If care extends for more than 15 days, the regular daily rate will apply beginning with the 16th day of placement. Use Category 30, and enter code 31, "Emergency Foster Care Placement" on the appropriate CCWIPS payment screen.

This irregular payment is computed by subtracting the daily age appropriate rate from \$35.00. The difference will be paid as an irregular payment, Code 31, "Emergency Foster Care Placement."

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Category 40 - Child Care for Foster Children - Limited Use 623-05-30-20

(Revised 8/15/06 ML #3025)

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Child care (day care) is not an entitlement, but is one option open to consideration by the Permanency Planning Committee in an attempt to arrive at the best possible situation for the foster care child.

The department continues to encourage the placement of young children with foster families where one of the parents is available at home for the child in foster care. Strive for placements where the foster child will not have an alternative arrangement during foster parent working hours. If alternative care is contemplated, it must be thoroughly discussed in the Child and Family Team meeting in terms of what is the best plan for the foster child.

North Dakota's policy for child care related to foster care was updated based on recent interpretations from the Administration for Children & Families, (ACYR-CB-PIQ-97-01).

For foster care reimbursement, child care must be provided by a provider that is licensed, certified, or has some other formal status under early childhood regulations. In North Dakota, the status is licensed, certified, registered, or approved relative to the foster child. Follow the guidelines of the Childcare Assistance Program. This is in accordance with federal requirements. Informal, episodic child care need not have such status and is presumably included in the basic foster care maintenance rate.

Child care that provides daily supervision during a foster parent's working hours when the foster child is not in school is an allowable expenditure for foster care maintenance. Also allowable are child care costs which facilitate the foster parent's attendance at activities which are beyond the scope of "ordinary parental duties."

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Child care is an allowable maintenance expenditure when the foster parent(s) is required to attend case conferences, team meetings, and court hearings without the foster child.

<u>Child Care Expenses - Claiming</u>

The reimbursement ceiling for child care expenses is based on community standards.

In order to claim foster care maintenance reimbursement for any child care expenditures during the foster parent's employment, or child care justified as being beyond the scope of ordinary parental duties, the need must be discussed in Child and Family Team meeting and documented in the foster child's permanency plan. Childcare billings signed by both the foster care provider and child care provider are required and must be retained in the child's county case file for audit purposes. The billing must contain the actual hours childcare is provided during each day, hourly (monthly) rate, and total amount due.

Example:

Child's Name: John Smith

Age: 3

Month/Year: December,

2002 Total Hours/Rate: 91 hours @ \$2.25/hour

Amount Due: \$204.75

Childcare provider's signature: Foster parent's signature:

Date:

Click <u>here</u> to view table example.

The county enters Category 40, "Child Care Expenses," on the appropriate CCWIPS payment screen.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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The cost of child care to provide for the foster parent's attendance at mandatory foster parent training is an allowable foster care expenditure. Refer questions to Children and Family Services -- Training Center at the University of North Dakota (CFS-TC) at 701-777-3442 regarding child care reimbursement for approved foster parent training.

Reference Chart - Appendix: T

"Child Care/Day Care - Quick Reference Related to Foster Care."

Child Care Expense Not Allowed under Foster Care Maintenance

The federal policy statement cited the legislative history of P.L. 96-272, which stated "payments for the costs of providing care to foster children are not intended to include reimbursement in the nature of a salary for the exercise by the foster family parent of ordinary parental duties." Accordingly, child care provided to a foster child to facilitate a foster parent's participation in activities that are within the realm of "ordinary parental duties" or child care activities which are deemed a social service are not reimbursable under foster care maintenance.

Examples:

Child care within the realm of ordinary parental duties, i.e. during illness of foster parent, is not reimbursable under foster care maintenance.

Relief care for foster parents is <u>not reimbursable under foster care</u> <u>maintenance</u>. Assuming the demands and needs of the child require, a "difficulty of care" payment could be considered to address the complexities of the situation and provide support to the foster parents.

Attendance at school conferences is an ordinary parental duty. The cost of child care to provide for the foster parent's attendance at school conferences is not an allowable expenditure under foster care maintenance.

Child care provided to facilitate a foster parent's visit to a foster child who is temporarily out of the foster home (hospital, camp, etc.) is <u>not an allowable foster care maintenance expenditure</u>.

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Special needs of a foster child best met in an early childhood care (day care) setting: Therapeutic child care is a social service and is <u>not an allowable expenditure under foster care maintenance</u>. If child care is full time, it is considered beyond socialization. Otherwise, consider whether a difficulty of care payment is appropriate.

Full time child care -- not employment related -- is <u>not allowable under</u> <u>foster care maintenance</u>.

Child care provided to enhance a child's social skills/peer relationships/socialization is <u>not reimbursable under foster care</u> <u>maintenance</u>. Difficulty of care payments could also be considered in a demanding situation, with the foster parent making the arrangements.

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Category 50 - Transportation Costs 623-05-30-25 (Revised 11/15/12 ML #3354)

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Arranging for and paying costs of necessary transportation for a child or parent to the foster home or a group or residential facility to which referral is being made is the responsibility of the county social service board, if the parents are unable to pay for transportation and eligible to receive assistance.

The policy related to transportation reimbursement for foster care is as follows:

<u>Transportation Reimbursement for Foster Child</u>

Foster care maintenance reimbursement for transportation for the foster child is allowable in various circumstances. Certain items are presumed to be included in the basic foster care maintenance rate, and no additional reimbursement can be claimed. (Examples of costs included in basic maintenance rate are costs of local transportation such as sporting events and extra curricular activities.) Other items (such as a foster child's visit home) may be reimbursed in addition to the basic foster care rate.

<u>Transportation for Medical Services</u>

Questions regarding cost of transportation for medical services should be referred to the Medical Assistance program or refer questions for specific situations to the eligibility staff in the county having financial responsibility for the child. Transportation for medical services is not reimbursable with foster care funds.

Allowable as Separate Item of Maintenance Expense for Foster Child

The foster child's visits home or travel to another location to visit their parents, siblings, relatives, or other caretakers are allowable as separate items of maintenance expense. Since it is not always possible or appropriate for the child's visit to take place at the child's home, reasonable transportation costs for visits at locations other than the child's

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home (child welfare office or other location deemed appropriate by agency) are allowable. These are allowable maintenance expenses for the foster child only.

A separate maintenance payment is allowable to reimburse foster parents who provide reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. Reimbursement will not exceed the State rate.

Allowable Administrative Expense

The child's attendance at administrative case/judicial reviews is not an allowable maintenance activity. However, these costs are allowable as administrative costs claimed for reimbursement on SFN 119, because they provide for the proper and effective administration of the state plan.

The foster child's transportation to and from pre-placement visits is not an allowable foster care maintenance expenditure. However, placement of the child, including pre-placement visits, is an example of an allowable administrative cost, claimed on SFN 119.

Placement of Child in Foster Care

Regulations at CFR 1356.60(c)(2) state that placement of the child is an example of an allowable administrative cost.

Pre-placement Visits in Family Foster Homes

Travel of the child to a pre-placement visit in family foster care is an allowable foster care administrative cost. Reimbursement is available to the county on SFN 119, "Monthly Summary of CSSB Operating Expenditures." Federal funds can be accessed if local matching funds are provided. No state general fund dollars are available.

Examples of allowable expenditures are meals, lodging, mileage, or commercial transportation expenses. Total expenditures must be within allowable North Dakota in-state per diem rates, even if the travel is to another state. The child's custodian and case manager are expected to seek the lowest possible rate when commercial transportation is required.

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Receipts are required and must be retained by the county for audit purposes.

Pre-placement visits and approval for same must be discussed at Child and Family Team meeting, and documented.

Follow guidelines in section on "Claiming Reimbursement" on SFN 119. Also, refer to "Pre-Placement Visits in Family Foster Home: Transportation for Child. Quick Reference."

Non-allowable Expenses

Reimbursement of expenses to transport the foster child to and from school is <u>not allowable</u>, unless travel involves transporting the child to the school in which the child is enrolled at the time of placement.

<u>Transportation Reimbursement for Parent/Siblings/Foster Parents</u>

Travel by foster parents, parents, and siblings, to visit the child are reimbursable:

- A visit to a child in family foster care by the foster parents, parents, and siblings is an allowable expenditure under Title XX, Social Service Block Grant, or Title IV-B, Child Welfare Services. The costs will be reimbursed on the "Monthly Summary of CSSB Expenditures," SFN 119. The expenses will be identified as "visit to child in family foster care."
- 2. A visit to a child in a residential facility by the foster parents, parents, and siblings is an allowable <u>maintenance</u> expense and reimbursed through the CCWIPS payment system, Category 50, Code 52.
- 3. Transportation to provide for foster parent attendance at administrative case/judicial review and mandatory case conferences/team meetings is an allowable Title IV-E <u>administrative</u> expenditure. The costs will be reimbursed on the "Monthly Summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

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<u>Visitation Costs for Child's Family – Parent Responsibility</u>

Parents have a responsibility to be involved and pay their own transportation and other expenses related to visitation of their children in foster care, if they are able. This is separate from any amount they pay to child support.

In instances where the parents determine they are unable to pay their transportation related expenses and request assistance, they have the opportunity to make application to county social services (financial county) for transportation reimbursement.

SFN 1023, "Foster Care Transportation Reimbursement Budget Sheet," is designed to determine eligibility for transportation reimbursement. It is to be completed once by the child's parent(s), no redetermination is required. Based on the information on the completed form, the parent(s) are either "eligible" or "not eligible" for transportation reimbursement, whether the child is in family or residential care.

Visitation costs by the child's family to the child's foster care setting are reimbursable. However, reimbursement for visitation costs differs between facility care (group/RCCF/RTC), and family foster care. (See below.) Examples of these costs include occasional family mileage or commercial transportation expenses, meals, and lodging. Total expenditures must be within allowable North Dakota in-state per diem rates, even if the travel is to another state. Receipts are required and must be retained by the county for audit purposes. The custodian and case manager are expected to seek the lowest possible rate when commercial transportation is required. Note that this section applies to the child's family, not the child.

Visitation travel for the family and approval for same must be discussed and documented in the child's case plan and on-going permanency planning reviews. ("Visitation Expense Reimbursement for Child's Family to Visit Child, Quick Reference."

Visits to Child in Group/Residential Care

Administrative costs to facilitate reunification are allowable in group/residential care. Costs for such visits are submitted as an irregular

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payment for reunification, Category 50, code 52. Receipts are required and must be retained in the county file for audit purposes. <u>Note that this section applies to the child's family, not the child</u>.

Examples of these costs are family expenses, meals, lodging, occasional mileage, or commercial transportation to facilitate visitation or participation in family week with a child in foster care at a facility.

We will pay actual costs within the amount of state per diem rates. Costs will be reimbursed based on North Dakota in-state rates, even if travel is to a facility in another state. Commercial transportation will be reimbursed at the actual rate. The facility and case manager are expected to seek the lowest possible rate, when commercial transportation is required.

<u>Visits to Child in a Psychiatric Residential Treatment Facility (PRTF)</u>

If eligible to receive assistance for transportation costs, travel by foster parents, parents, and siblings to visit the child are allowable administrative costs. The costs will be reimbursed on the "Monthly summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

Examples of these costs are family expenses, meals, lodging, occasional mileage, or commercial transportation to facilitate visitation or participation in family week with a child in foster care at a PRTF.

Travel by a child to visit parents and siblings are also an allowable administrative cost. The costs will be reimbursed on the "Monthly Summary of CSSB Operating Expenditures," SFN 119. The expenses will be identified as "foster care transportation."

Claiming Reimbursement on SFN 119

For those allowable transportation items claimed on SFN 119, the county pays the cost of the transportation, meals, etc., within state rates. In claiming reimbursement, identify the expenditure as either "Foster Care Transportation" or "Visit to Child in Family Foster Care."

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Claims must be timely and submitted within the current fiscal year. Effective July 1, 2002, no state general funds are available. Counties are responsible for a local match.

Documentation

When transportation expenses are reimbursed either on SFN 119 or as an irregular payment on CCWIPS, receipts must be retained in the county file for audit purposes.

Quick Reference Charts - Transportation

Several "Quick Reference" charts are included to assist staff in determining what transportation costs are reimbursable, and in what manner those costs will be reimbursed. Those charts are:

- 1. Transportation Reimbursement -- Quick Reference.
- 2. <u>Visitation Expense Reimbursement for Child's Family -- Quick</u> Reference
- 3. Pre-placement Visits in Family Foster Home: Transportation for Child.

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Category 60 - Excess Maintenance Payments (EMP) 623-05-30-30

(Revised 1/15/12 ML #3306)

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All Excess Maintenance Payments (EMPs) must be discussed at Child and Family Team meetings and approved in advance by the regional supervisor. **Retroactive payments are inconsistent with state policy**.

The Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form (SFN 1865) is to be completed by the case manager when an Excess Maintenance Payment (EMP) is being considered. The child's behavior/needs must be carefully assessed prior to completing the rating form. The total score will assist in determining the appropriate EMP level of care. The level will be reviewed at every foster care child and family team meeting.

A family foster care rate may be negotiated in <u>excess</u> of the standard rate in special circumstances when the child has special needs or difficulty of care which significantly affects her/his adjustment or cost of care. There are two types of excess maintenance payments:

1. Levels I, II, and III.

Specialized Family Foster Care where an excess maintenance payment is included as part of the total maintenance payment. For payment purposes, this is a Level I, II or III excess payment.

	<u>Category 60</u>	
Level I	Code 61	\$1.67/day
Level II	Code 62	\$3.33/day
Level III	Code 63	\$5.00/day

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Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

Procedure:

The regional supervisor will send a copy of the signed "Agreement to Furnish Specialized Family Foster Care Services," SFN 904, to Children and Family Services, North Dakota Department of Human Services.

2. Level IV (Category 60)

The regional supervisor discusses the Level IV excess payment (EMP) request with the Foster Care Administrator prior to approval. A determination will be made based upon the pertinent facts surrounding the request for increased compensation. It must involve a substantial physical, emotional, or behavioral problem, which has also been thoroughly discussed during the permanency planning process. The approval from the regional supervisor must include the amount of the Level IV, start and stop dates and the name of the family foster care provider. The stop date should not exceed the court order date or the end of the biennium, whichever is earlier. **The EMP must be approved in writing by the regional supervisor and state office prior to making payment**.

The CCWIPS payment system will allow only one EMP payment for the same service dates. For example, a foster family receiving a Level I EMP payment cannot receive a Level IV payment for the same service dates. In these instances, call the Help Desk 1-800-429-8829.

Foster parents are entitled to payment of a full day for the first day and the last day for which they provide care.

Regional supervisor will send a copy of the regional approval for the increased compensation to Administrator, Foster Care Program, Children and Family Services, North Dakota Department of Human Services.

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Enter the information on the appropriate CCWIPS screen. Level IV payments are Category 60, code 64.

Refer to CCWIPS User Manual for technical assistance related to entering irregular foster care payments on the CCWIPS system.

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Category 70 - Minor Parent/Infant Foster Care 623-05-30-35

(Revised 8/15/06 ML #3025)

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This applies to situations where the infant has not been adjudicated deprived.

Federal law was amended (Sec. 9133, COBRA, 1987 amended Sec. 475 (4) of Title IV-E of Social Security Act) to provide expanded foster care payments in cases where the foster care recipient is a child with a son or daughter living in the same foster home or child care institution.

Effective October 1, 1988, included in the foster care payment for the minor parent, will be an amount necessary to cover the maintenance and other costs of the son or daughter. The amount for the son or daughter living with the minor foster child will follow the age appropriate foster care rate schedule.

To include the amount for the son or daughter living with the minor parent in foster care, include an irregular payment as Category 70, "Parent/Infant Payment."

Also, effective October 1, 1988, the state is prohibited from including in an TANF assistance unit any son or daughter of a minor parent receiving such foster care maintenance payments.

If the minor parent and child are later separated, the needs of the child can no longer be included in the minor parent's foster care payment. In such cases the child's need and eligibility for TANF or foster care must be determined based on the child's current and individual circumstances.

A child whose costs in a foster family home or child care institution are covered by the Title IV-E foster care maintenance payments being made

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with respect to his/her minor parent is eligible for medical assistance under Title XIX. Refer to Manual Chapter 510-05 (Medicaid Eligibility Factors), or contact Medical Services if you have questions.

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Category 80 - Extra Supervision 623-05-30-40 (Revised 8/15/06 ML #3025)

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<u>CODE 81 – Extra Supervision -- Group/Residential Care:</u>

Infrequently, a child requires extra one-on-one supervision in residential care for a limited period of time, to stabilize or transition the child to a setting that may better address the child's needs. Prior to considering a request for extra supervision in a facility, the social worker must thoroughly review the situation to ensure that the current setting is indeed an appropriate care situation for the child for the time being. Or, is the child's behavior such that hospitalization or another placement is required.

CODE 81 approval requires permanency planning, regional supervisor, and state foster care administrator prior approval. When granted, approval is for a specified one-on-one caregiver, for a set amount of hours per day at a specified rate, and for a limited period of time. It is rarely used, but available in special, limited circumstances.

Enter CODE 81, "Extra Supervision, Group/Residential Care," on the appropriate CCWIPS screen.

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Education 623-05-35 (Revised 1/15/12 ML #3306)

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When the care of a child is paid through foster care funds, it will ordinarily be expected that the child will attend a public school. **Foster care funds are not used for educational services** including correspondence courses. Education needs of the child either in North Dakota or out-of-state are the responsibility of the local school district and/or the Department of Public Instruction (DPI). Education placements (Boarding Care) are the total responsibility of the local school district and/or DPI. Discuss funding for any educational needs for foster care children with the local school district.

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REPEALED
College or Vocational School 623-05-35-05
(Repealed 1/15/12 ML #3306)

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Boarding Care for Special Education Students 623-05-35-10

(Revised 11/1/10 ML #3250)

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Funds for children who require board and room to attend special education classes are available through the local school district in cooperation with the Department of Public Instruction. This service is considered <u>boarding care</u>, and is not foster care. The foster care payment program is <u>not</u> available to children who need board and room (boarding care) to be able to attend special education classes to meet their educational needs and who otherwise would be living at home. Questions regarding boarding care should be referred to the local special education director at the public school system.

Children who are under the care, custody, and control of a public agency, or the North Dakota Department of Human Services in foster care and in need of special education classes continue to be eligible for foster care payments for the days the child is physically in the foster home.

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Repealed Reductions for Absences 623-05-40 (Repealed 3/1/07 ML #3070)

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If a child is out of a home for two weeks or less under a plan which meets the approval of the county social service board, no reduction in a monthly payment is required. If the absence is for more than two weeks, but not over a month, the plan must be approved by the county social service board and the regional supervisor.

Purchase of Foster Care From Other Agencies Classification of Agencies 623-05-45-05

(Revised 3/13/15 ML #3434)

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The incorporated and licensed agencies are:

- 1. Agencies licensed to make foster home placements:
 - Catholic Charities North Dakota, 5201 Bishops Boulevard Suite B, Fargo, ND 58104
 - Christian Family Life Services, 203 South 8th Street, Fargo, ND 58102
 - Lutheran Social Services, Box 389, Fargo, ND 58107
 - PATH-ND (Professional Association of Treatment Homes), 1202
 Westrac Dr S, Suite 100, Fargo, ND 58103
 - The Village Family Service Center, 1201 25th Street South, Box 9859, Fargo, ND 58106-9859
 - LDS Family Services,6120 Earle Brown Dr #20, Brooklyn Center, MN 55430
 - God's Children Adoptions, 23592 Ridgewood Circle, Fergus Falls, MN 56537
- 2. <u>Licensed group and residential child care facilities (RCCF)</u>:
 - Charles Hall Youth Services, Box 1995, Bismarck, ND 58502, (Phone: 255-2773) operates:
 - Charles Hall Home at 320 South 14th Street, Bismarck, ND
 - GoodBird Home, 1417 East Divide Avenue, Bismarck, ND
 - Laramie Group Home at 1120 Laramie Drive, Bismarck, ND
 - Eckert Youth Homes, 1102 7th Avenue East, Williston, North Dakota 58801 (Phone: 572-7262)
 - Lake Region Special Education (Phone: 662-5036) operates:

- Harmony House, 406 4th Avenue, Devils Lake, North Dakota 58301
- Dakota Boys and Girls Ranch RCCF, Box 5007, Minot, North Dakota 58702
- Dakota Boys Ranch Fargo Youth Home, 1641 31st Ave S, Fargo, North Dakota 58103
- Pride Hope Home, PO Box 4086, Bismarck, North Dakota 58501
- Home on the Range for Boys, 16351 I-94, Sentinel Butte, North Dakota 58654 (Phone: 872-3745)
- Prairie Learning Center, 7785 St. Gertrude Avenue, Raleigh, North Dakota 58564 (Phone 701-597-3419)
- Lake Oahe Group Home of Standing Rock Nation, P. O. Box 176, Fort Yates, ND 58538 (Phone 701-854-3603) Approved facility for Tribe.
- 3. The following is a list of ND Psychiatric Residential Treatment Facilities (PRTFs):
 - Ruth Meiers Grand Forks,, ND
 - Western Plains DBGR Bismarck, ND
 - Dakota Boys & Girls Ranch Fargo, ND
 - Luther Hall Fargo, ND
 - Pride-Manchester House Bismarck, ND

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Medical Services Payment - Children Eligible for Title XIX Under Care of Child-Care Agencies and Family Foster Care Homes 623-05-45-10

(Revised 8/15/06 ML #3025)

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Medical Assistance Eligibility questions regarding particular foster children should be referred to county of financial responsibility. Licensed child care agencies or family foster care providers need to inform the medical provider of the foster child's medical assistance eligibility status.

Payment procedures for medical assistance to medically eligible foster children are the same as for any other eligible Medicaid recipient. Providers have authorizations for payment and when services are rendered the medical provider can bill medical services division directly.

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Medicaid Identification Card 623-05-45-15 (Revised 8/15/06 ML #3025)

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A Medicaid Identification Card is issued to each Medicaid recipient shortly after Medicaid eligibility has been established. The foster child will receive such a card.

The Medicaid Identification Card must accompany the child from placement to placement, whether the child is in care in a family foster home, group home, or residential facility.

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Emergency Assistance 623-05-50 (Revised 8/15/06 ML #3025)

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Emergency assistance is the provision of out-of-home care to eligible families with children who are experiencing an emergency.

An emergency exits because:

- 1. A child is in out-of-home care; or
- 2. A child is at risk of out-of-home care; or
- 3. A child is the subject of a child abuse or neglect report; and
- 4. The emergency did not arise because an adult family member refused (without good cause) employment or training.

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Application 623-05-50-05 (Revised 8/15/06 ML #3025)

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Emergency Assistance Service Application, SFN 38, is to be made by a parent/guardian or representative or a legal custodian.

When a child is in foster care, the legal custodian may make application and sign for emergency assistance. This would include a representative of a county social service board, Division of Juvenile Services, or in situations where the parental rights have been terminated, the designee of the Executive Director of the North Dakota Department of Human Services.

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How to Make Sure That There is not More Than One Application on the Same Facility Within a Year Given the Variety of Services 623-05-50-10

(Revised 8/15/06 ML #3025)

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Since the state has defined emergency assistance broadly, it is not necessary to have a separate service application each time the family receives a different service. For example, if a family received intensive inhome service for three months and then a child went into foster care, it is not necessary to have a new emergency assistance service application form. Thus, there would only be nine months of service eligibility left for the foster care. If the emergency continues, an emergency assistance application will need to be completed.

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Eligibility 623-05-50-15 (Revised 8/15/06 ML #3025)

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Eligibility is to be determined by the Director, County Social Service Board, or their designee, based on the information provided to them by the applicant. In order to be eligible, the child must meet the emergency definitions listed above and:

- 1. The child must have lived with a parent or specified relative within the last six months. (The definition of a specified relative is the same as for Title IV-E.)
- 2. The child or family member currently does not have sufficient resources immediately available to pay for emergency assistance services (self-declaration by the applicant).
- 3. The application must be made by a parent or specified relative of a child under age 21 or by a legal custodian on behalf of a child under age 21. A child age 18, who signs himself back into foster care would sign the emergency assistance application (this would be considered as a review).

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Non-eligible Child 623-05-50-20 (Revised 8/15/06 ML #3025)

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- 1. A foster care child who did not physically reside with a parent or specified relative during the six months prior to the initial court order.
- 2. A child that was not eligible for Emergency Assistance prior to July 1997 and remained continuously in foster care.
- 3. A foster child who is in receipt of SSI.

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Eligibility Determination 623-05-50-25 (Revised 8/15/06 ML #3025)

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Eligibility staff at the county social service board should:

- First determine if the child is eligible for Title IV-E, just as they do now.
- 2. If the child is not IV-E eligible, determine if the child is eligible for Emergency Assistance.
- 3. If the child is not eligible for Emergency Assistance, determine if the child is eligible for regular foster care.

It is emphasized that the use of Emergency Assistance federal funds does not create any new eligibility. Only children who had previously been eligible for regular or Indian regular foster care would be eligible for Emergency Assistance foster care. A child previously determined Title IV-E eligible would never become eligible for emergency assistance unless it were a new foster care episode.

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Determining Eligibility for Payment Generation 623-05-50-30

(Revised 8/15/06 ML #3025)

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An appropriate Emergency Assistance code (EA) is available for the eligibility worker to enter in the CCWIPS payment system.

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Restrictions 623-05-50-35 (Revised 8/15/06 ML #3025)

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Emergency Assistance Services are authorized for a period not to exceed 365 days in a twelve-month period from the service authorization date. Emergency Assistance is limited to a maximum duration of 12 months or less, per authorization period, as necessary to alleviate the emergency condition.

The addition of Emergency Assistance simply adds another financial alternative to the traditional regular foster care. It is not to be used when a child is IV-E eligible. Nothing in the practice of delivering foster care changes with the addition of the Emergency Assistance for regular foster care. All of the rules, policies, regulations, and guidelines pertaining to permanency planning and other eligibility criteria for foster care remain the same.

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Emergency Assistance Reauthorization 623-05-50-40 (Revised 8/15/06 ML #3025)

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Emergency Assistance is limited to 365 days in a twelve-month period. If the emergency has not been resolved to permit the return of the child to the home, another application (<u>SFN 38</u>, Emergency Assistance Service Application) is required within 30 days for a period not to exceed 365 days.

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Differential Roles of Staff 623-05-55 (Revised 11/1/10 ML #3250)

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Title IV-E, Regular Foster Care, and Medical Assistance eligibility requires certain jointly planned and coordinated activities between the income maintenance and social service staff including DJS Representative. Despite their interrelatedness, however, there is a clearly defined distinction in their roles, activities, and responsibilities.

Income maintenance personnel's responsibilities are directed to:

- 1. Determining a child's technical and financial eligibility based on information contained in the Title IV-E/Title XIX Application;
- 2. Entering payment and other information required for payment on CCWIPS.
- 3. Conducting comprehensive, periodic reviews of eligibility;
- 4. Advising the custodian of the availability of family planning and Health Tracks services;
- 5. Determining that court orders contain the appropriate language and are in effect;
- Assuring that the children in foster care meet all the other requirements to receive AFDC/FC (IV-E), pursuant to eligibility requirements as of July 16, 1996, (P. L. 104-193, Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 and the Adoption and Safe Families Act of 1997;
- 7. Determining that financial need is in compliance with AFDC and Medical Assistance standards;
- 8. Assuring that the service plan is in the eligibility file or cross-referenced to the appropriate service file.

<u>Social Service Staff and DJS Representative Activity will be Directed</u> Towards:

1. Assisting, as required by the court, in determining a child's need for foster care;

- 2. Finding, assessing, and licensing foster homes; making sure that the foster home is licensed/approved before making placements and entering the current license on CCWIPS. This does not apply to the DJS with the exception of referring potential foster homes to the county social service board.
- 3. Arranging for and supervising a child's placement in accordance with the permanency plan;
 - a. Ensure that the eligibility worker is aware of the child's placement.
- 4. Periodically reviewing the social plan including continued need for care in a suitable placement;
- 5. Working with the child's parents or other relative towards the child's eventual return home, if appropriate;
- 6. Determining need for, and amount of, special allowances and social service payments and giving the information to the income maintenance staff;
- 7. Ensure that court orders contain the appropriate language and are in effect; and
 - a. Ensuring that the EW gets a copy of the original and all updated court orders.
- 8. Helping eligibility worker to secure eligibility information.
 - a. Social service staff, including DJS representatives, must assist the county eligibility worker in accessing all necessary information needed to determine initial and on-going foster care and Title XIX (Medicaid) eligibility.
- 9. Initiate group home placement/payment approval on FRAME;
- 10. Immediately advise regional offices of all foster care placements;
- 11. Accurate and timely entry of FRAME information;
- 12. Sign a Title IV-E/Title XIX Application and other appropriate forms as needed;
- Child and Family Team will negotiate maintenance payments above the standard rate and keep the EW informed in a timely manner of these issues.
- 14. Referring seriously disabled children to SSI; and

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15. If a child loses Title XIX (Medicaid) eligibility and it impacts on payment, it is the responsibility of the case manager to make an appropriate alternate placement.

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REPEALED Forms 623-05-60

Understanding of the Parties for Continued Foster Care Services, SFN 1781 623-05-60-05

(Repealed 1/15/12 ML #3306)

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Forms 623-05-60 Credit Form, SFN 827 623-05-60-10 (Revised 8/15/06 ML #3025)

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Any payments to the State for foster care refunds and reimbursements must be submitted with Credit Form, <u>SFN 827</u>. The proper name and <u>foster care</u> case number must be included to ensure proper credit.

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Placement Notification and Preliminary Eligibility Determination, SFN 630 623-05-60-15

(Revised 8/15/06 ML #3025)

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<u>SFN 630</u> is an official form designed to notify the eligibility staff that the child has entered foster care. This form provides basic information, which in some cases will provide sufficient information to make a IV-E eligibility determination without further data collection. In other cases it will need to be supplemented by further data collection and the use of the <u>SFN 641</u>, Foster Care Application, etc.

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Notice of Change Form, SFN 45 623-05-60-20 (Revised 11/1/10 ML #31250)

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<u>SFN 45</u>, Notice of Change Form, is a form that can be used by the social worker to notify the eligibility staff of changes in the child's situation, which will have an impact on the child's eligibility for federal funds, and to alert the eligibility staff and Child Support Enforcement to placement changes and closures.

This form is available electronically via E-Forms.

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Title IV-E/Title XIX Application, SFN 641 623-05-60-25 (Revised 8/15/06 ML #3025)

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The foster care application (<u>SFN 641</u>) is completed by the parent or the custodian, depending on the circumstances. Eligibility staff utilizes the information on the completed form to assist in eligibility determination for Title IV-E/Title XIX.

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Supplement to SFN 641 or 642, Attachment A. Data for Unemployed Parent Program 623-05-60-30 (Revised 8/15/06 ML #3025)

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This form (<u>SFN 641</u> or <u>SFN 642</u>) is utilized when there is reason to believe that a child might be eligible for Title IV-E/Title XIX through the Unemployed Parent Program. This form will not be utilized in every situation, but only in those cases where eligibility staff has determined that a child might be found eligible through the Unemployed Parent Program.

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Title IV-E Initial Eligibility, SFN 869 623-05-60-35 (Revised 8/15/06 ML #3025)

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<u>SFN 869</u> is a mandatory form and is completed once, at the child's entry to foster care, to determine eligibility for federal funds.

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REPEALED Title IV-E Reimbursability, SFN 870 623-05-60-40 (Repealed 11/1/10 ML #3250)

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<u>SFN 870</u> is a mandatory form, which will assist in determination of the child's reimbursability for Title IV-E. Information derived from this form is used to determine the appropriate match symbol for payment purposes. This form is to be completed at initial determination, redeterminations, and for Title IV-E cases at the time of case closing.

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Title IV-E Foster Care - Income Calculation Worksheet, SFN 873 623-05-60-45

(Revised 8/15/06 ML #3025)

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The use of <u>SFN 873</u> is recommended when the household has earned income to help in the determination of Title IV-E eligibility.

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REPEALED
Title IV-E/Title XIX Redetermination, SFN 642
623-05-60-50

(Repealed 11/1/10 ML #3250)

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Title IV-E/Title XIX Redetermination, <u>SFN 642</u>, must be completed every six months and at case closing for Title IV-E cases. SFN 642, Title IV-E/Title XIX Redetermination, will need to be manually sent every six months.

You will need to maintain a tracking (tickler) system for redetermination review timeliness.

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Placement Agreement Between Counties 623-05-60-55 (Revised 8/15/06 ML #3025)

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	PLACEMEN ⁻	T AGREEME	NT BETWEE	N COUNTIES		
	(Sending County)					
CSSB hereby enter into the following agreement:						
		CSSI	3 has need f	or foster		
care	placement of			_ and has		
requ	ested of		CSSI	3 use of a		
foster care home in County. Such						
placement will be affected on, 20,						
and t	the following conditio	ns are agre	ed to betwe	en both		
coun	ties:					
 2. 	, the receiving County SSB, will provide ongoing service to and supervision of such placement, just as if this case were a legal responsibility of the receiving county; Child and Family Team meetings shall be called regularly by the receiving county, and the sending county shall be notified of all permanency planning meetings and will include the participation of					

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the sending county, such participation occurring by telephone or in person;

- 3. Reunification services shall be provided by the receiving county unless agreed to otherwise;
- 4. The receiving county will provide administration of the payment process of this case, unless agreed to otherwise;
- 5. The sending or receiving county may request administrative review/staffing at any time deemed essential by either county.
- 6. Other Conditions/Exceptions:

Dated this	day of	, 20	
Director	 Director		
County So	ocial Service Board		
County So	ocial Service Board		

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Emergency Assistance Service Application, SFN 38 623-05-60-60

(Revised 8/15/06 ML #3025)

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SFN 38 is available as an eform.

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Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form, SFN 1865 623-05-60-65 (Revised 3/1/08 ML #3126)

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The Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form (SFN 1865) is to be completed by the case manager when an Excess Maintenance Payment (EMP) is being considered. The child's behavior/needs must be carefully assessed prior to completing the rating form. The total score will assist in determining the appropriate EMP level of care. The level will be reviewed at every foster care child and family team meeting.

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Charts 623-05-65
Child Care/Day Care - Quick Reference (Related to Foster Care) 623-05-65-05
(Revised 8/15/06 ML #3025)

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Click here to view and/or print the Child Care/Day Care - Quick Reference.

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Transportation Reimbursement - Quick Reference 623-05-65-10

(Revised 9/1/10 ML #3239)

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Click $\underline{\text{here}}$ to view and/or print the Transportation Reimbursement - Quick Reference.

Division 20 Program 600 Service 623 Chapter 05

Visitation Expense Reimbursement for Child's Family to Visit Child - Quick Reference 623-05-65-15

(Revised 11/15/13 ML #3392)

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VISITATION EXPENSE REIMBURSEMENT FOR CHILD'S FAMILY TO VISIT CHILD QUICK REFERENCE

FAMILY FOSTER CARE OR PRTF	GROUP/RCCF/CARE
Claim on Form 119 and identify as visit to child in family foster care or PRTF. Federal funds can be accessed if local matching funds are provided.	In facility care, this is considered an allowable foster care administrative cost to facilitate reunification.
Refer to NDDHS 623-05 for policy and limitations.	Submit costs on CCWIPS as an irregular payment, category 50, code 52.
	Refer to NDDHS 623-05 for policy and limitations.

NOTE: SFN 119, "Monthly Summary of CSSB Operating Expenditures"

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Pre-placement Visits in Family Foster Home: Transportation for Child - Quick Reference 623-05-65-20 (Revised 8/15/06 ML #3025)

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PRE-PLACEMENT VISITS IN FAMILY FOSTER HOME: TRANSPORTATION FOR CHILD QUICK REFERENCE

FOR CHILD	HOW TO CLAIM			
Travel to pre-placement visit in family foster care is an allowable IV-E administrative cost.	Administrative reimbursement. Claim on SFN 119, identify as foster care transportation. Federal funds can be accessed if local			
Examples of allowable	matching funds are provided.			
expenditures are: meals,				
lodging, mileage or commercial transportation.				
Must be within allowable North Dakota in-state per diem rates - even if travel is to another state.				
See NDDHS 623-05 for complete policy & limitations.				
08-2002				

NOTE: SFN 119, "Monthly Summary of CSSB Operating Expenditures"

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Foster Care Transportation Reimbursement Budget Sheet 623-05-65-25

(Revised 1/26/07 ML #3051)

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Division 20 Program 600 Service 623 Chapter 05

Categories and Codes - Irregular Maintenance Payments - Family Foster Care 623-05-65-28

(Revised 11/15/13 ML #3392)

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Division 20 Program 600 Service 623 Chapter 05

Foster Care Irregular Payments Summary & Examples of Allowable & Non-Allowable Family Foster Care 623-05-65-30

(Revised 11/15/13 ML #3392)

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Division 20 Program 600 Service 623 Chapter 05

Categories and Codes Group & Residential Irregular Maintenance Payments 623-05-65-35

(Revised 11/15/13 ML #3392)

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Division 20 Program 600 Service 623 Chapter 05

Group & Residential Irregular Payment Policy 623-05-65-40

(Revised 8/15/06 ML #3025)

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